

Social Security Bulletin

HD
7123
A34

January 1957

Volume 20

Number 1

Growth in Protection Against Income Loss From
Short-Term Sickness: 1948-55

Private Employee-Benefit Plans Today



THE SOCIAL SECURITY BULLETIN is the official monthly publication of the Social Security Administration. An annual statistical supplement, with calendar-year data, has been carried as part of each September issue since 1949; the supplement with calendar-year data for 1955 is being issued as a separate publication. Statements in BULLETIN articles do not necessarily reflect official policies of the Social Security Administration.



The BULLETIN is prepared in the Division of Program Research, Office of the Commissioner, Social Security Administration, under the editorial supervision of Josephine Merican and Angela Murray, Associate Editors. Suggestions or comments concerning the BULLETIN should be addressed to the Division of Program Research. The BULLETIN is planned with the advice and aid of an editorial advisory committee representing the units of the Social Security Administration.

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Price: \$2.75 a year in the United States, Canada, and Mexico; \$3.50 in all other countries; single copies, 25 cents. Price of the 1955 Supplement, 40 cents.

Use of funds for printing this publication has been approved by the Director of the Bureau of the Budget (October 8, 1956).

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Social Security in Review

AT the end of October, monthly benefits amounting to \$460.9 million were being paid under the old-age and survivors insurance program to 8.7 million persons. The totals represent increases of \$57.0 million in monthly amount and almost 850,000 in number from the totals a year earlier; the percentage increases were 14 percent and 11 percent, respectively. Among the various types of benefits the increase in number ranged from 3 percent for parent beneficiaries to 12 percent for persons receiving old-age or wife's benefits.

About 7 million persons aged 65 or over were receiving monthly benefits

—three-fourths of a million more than in October 1955. Their monthly benefits totaled \$395.3 million, compared with \$343.9 million a year earlier. An increase of 100,000 for the 12 months brought the number of mothers and dependent or orphaned children under age 18 who were being paid benefits to about 1.7 million at the end of October. Their monthly benefits totaled \$65.6 million.

Monthly benefits awarded in October numbered 115,000, about 24,000 fewer than in September. October was the twenty-sixth consecutive month, however, in which the number of monthly benefit awards exceeded 100,000. Lump-sum death

payments made during the month totaled \$7.7 million. The average lump-sum payment per deceased worker was \$199.12, about the same as in September.

In October a disability freeze period was established for 11,200 workers, and applications from 14,400 workers were denied. By the end of October almost 192,000 applications for a disability freeze period had been allowed, and 182,000 had been denied. As a result of the freeze, about 40,700 old-age beneficiaries had their benefits increased by an average monthly amount of \$9.83 during the period from July 1955 to the end of September 1956. About 16,100 monthly benefits payable to the dependents of these retired workers and to the survivors of workers who had established a period of disability before their death were increased because of the freeze. For the same reason, lump-sum death payments based on the earnings records of 7,300 deceased workers were increased by an average amount of \$21.40 per worker.

The 307,000 applications for benefits that were filed during October in the district offices of the Bureau of Old-Age and Survivors Insurance set a record high for the third consecutive month. In the 3 months August-October, about 885,000 applications were filed—355,000 of them from women aged 62-64. The applications of most of these women will be reflected in the awards for November, the first month for which they can receive benefits.

- Increased Federal financial participation in payments to recipients of the special types of public assistance, which became possible October

Old-age and survivors insurance:

Monthly benefits in current-payment status:

	October 1956	September 1956	October 1955
Number (in thousands)	8,701	8,648	7,856
Amount (in millions)	\$461	\$457	\$404
Average old-age benefit (retired worker)	\$63.31	\$63.25	\$61.64
Average old-age benefit awarded in month	\$68.01	\$69.96	\$67.88

Public assistance:

Recipients (in thousands):

	October 1956	September 1956	August 1955
Old-age assistance	2,513	2,512	2,553
Aid to dependent children (total)	2,236	2,235	2,171
Aid to the blind	107	107	104
Aid to the permanently and totally disabled	265	263	242
General assistance (cases)	282	281	286

Average payments:

	October 1956	September 1956	August 1955
Old-age assistance	\$57.46	\$55.25	\$53.28
Aid to dependent children (per family)	93.02	90.43	87.75
Aid to the blind	82.87	81.12	57.82
Aid to the permanently and totally disabled	57.89	56.85	55.51
General assistance (per case)	54.31	52.53	53.05

Unemployment insurance:

	October 1956	September 1956	August 1955
Initial claims (in thousands)	834	761	794
Beneficiaries, weekly average (in thousands)	752	889	672
Benefits paid (in millions)	\$91	\$95	\$70
Average weekly payment for total unemployment	\$27.57	\$27.77	\$26.02

1, 1956, under the Social Security Amendments of 1956, was largely responsible for the \$7.7-million rise in expenditures for these programs during October. Of the total increase, \$5.6 million was in old-age assistance, and the program of aid to dependent children accounted for \$1.5 million. Expenditures for each of these programs, and for aid to the blind and aid to the permanently and totally disabled as well, went up roughly 3-4 percent. In general assistance, which is financed entirely from State and local funds, total payments increased more than \$500,000 or 3.8 percent. Part of this rise was attributable to seasonal factors, but general assistance expenditures usually have shown greater-than-seasonal increases when additional Federal funds have been made available for the special types of assistance.

Recent caseload trends continued during October in each of the special types of public assistance except old-age assistance. The downward trend for that program was reversed, with a slight rise (about 800) in the number of aged recipients. The increase in Kentucky accounted for more than two-thirds of the national increase; the State's lien law was repealed in May, and the effect on the caseload is continuing. Twenty-six States, in all, reported higher caseloads in October than in September—the largest number with a month-to-month increase in nearly 2 years.

More liberal State policies, attributable largely to the amendments to the Federal law, undoubtedly played some part in the reversal of trend in the national caseload.

Although the number of families receiving aid to dependent children increased in 31 States during October, nationally it declined for the fifth consecutive month; for the last 3 of these months, however, the total number of recipients has increased. The drop in October in the number of families receiving aid was more than accounted for by the decline reported by Missouri, where the availability of seasonal employment was primarily responsible for a decline of about 1,000. Caseloads in the programs of aid to the blind and aid to the permanently and totally disabled continued to move upward slightly.

The new provisions governing Federal financial participation made it possible for all but a few States to increase individual payments between \$3 and \$4 a month for the needy aged, the blind, and the disabled, and between \$1 and \$2 per person in aid to dependent children, without spending more from State and local funds per recipient than they had before October.

A large number of States took action in October to make higher payments to recipients. Not all the increases can be attributed to the amendments, however, since some States revised payments under their

usual procedures for reflecting price changes. A few States had adjusted payments in months immediately preceding the effective date of the amendments, and other States expect to do so within the next few months. Various measures were used by States to liberalize payments in October. Either singly or in combination, maximums on assistance payments were increased, standards of assistance were raised, and reductions in payments were made less stringent or eliminated.

In old-age assistance the national average payment rose \$2.21 in October—the net effect of higher payments in 40 States. Increases of more than \$3 were reported by 14 States. In aid to dependent children the average payment per family for all States combined rose \$2.59; the average per recipient increased 67 cents. The average payment per family was higher in 41 States, and in 27 States the increases ranged from \$1.07 to \$8.25. National average payments in aid to the blind and aid to the permanently and totally disabled increased \$1.75 and \$1.04, respectively, with most of the States reporting rises.

Average payments in each of the four special types of public assistance were less than in September in only a few States. Most of the decreases were slight. Alabama raised maximums on payments in all pro-

(Continued on page 27)

	October 1956	September 1956	October 1955	Calendar year 1955	1954
Civilian labor force, ^{1,2} total (in thousands)	68,082	68,069	67,292	65,847	64,468
Employed	66,174	66,071	65,161	63,193	61,238
Unemployed	1,909	1,998	2,131	2,654	3,230
Personal income ^{1,3} (billions; seasonally adjusted at annual rates), total	\$332.6	\$329.5	\$311.6	\$306.1	\$287.3
Wage and salary disbursements	230.2	228.5	215.3	210.4	195.5
Proprietors' income	42.2	41.2	39.2	39.0	38.4
Personal interest income, dividends, and rental income	39.9	39.7	37.7	37.4	35.4
Social insurance and related payments	13.9	13.8	12.4	13.1	11.9
Public assistance	2.6	2.5	2.5	2.5	2.4
Other	9.7	9.7	9.8	9.0	8.3
Less: Personal contributions for social insurance	6.0	5.9	5.3	5.2	4.6
Consumer price index, ^{1,4} all items	117.7	117.1	114.9	114.5	114.8
Food	113.1	113.1	110.8	110.9	112.6
Medical care	134.1	134.0	128.7	128.0	125.2

¹ Data relate to continental United States, except that personal income includes pay of Federal personnel stationed abroad.

² Bureau of the Census.

³ Data from the Office of Business Economics, Department of

Commerce. Components differ from those published by the Department, since they have been regrouped; for definitions, see the Annual Statistical Supplement, 1955, page 7, table 1.

⁴ Bureau of Labor Statistics.

The Growth in Protection Against Income Loss From Short-Term Sickness: 1948-55*

Insurance and various other forms of protection against income loss resulting from sickness experienced a rapid growth during the years immediately after World War II. In the past 3 years, however, their growth has only barely kept pace with increases in per capita income and expansion in the labor force. As a consequence, there has been little overall increase in the extent of the protection afforded since 1952.

PERSONS in America's labor force were subject to a total income loss estimated at almost \$6.6 billion in 1955 as a result of short-term illness and disability.¹ The rise from 1954 of an estimated \$440 million in overall income loss from sickness in 1955 results from the increase in the total earnings of the labor force, since the assumption is made that the average amount of time lost by workers because of short-term illness has stayed constant year after year.²

Current protection against income loss is provided to two classes of wage and salary workers by law—government workers and those coming under temporary disability insurance laws—and without a legal requirement to others. The self-employed comprise still another category. Table 1 identifies the potential income loss from

sickness of these four distinct components of the labor force.

Almost all Federal civilian full-time employees and more than three-fourths of all employees of State and local governments are eligible for sick-leave benefits. These benefits vary from 3 or 4 days to 12 days or more and under some programs can be accumulated from year to year if not used. The estimated loss of \$783 million to 6.4 million government workers in 1955 made up 12 percent of the total loss and 14 percent of the loss to wage and salary workers.

Railroad employees throughout the Nation and the workers in four States

must, by law, be covered by insurance providing benefits for temporary disability. Railroad workers have been eligible for temporary disability benefits (under the Federal Railroad Unemployment Insurance Act) since 1946. In 1948 California and Rhode Island were the only States that had temporary disability insurance laws; in 1949 New Jersey began to pay this type of benefit, and in 1950 New York started a program. By 1955 the estimated value of time lost as a result of the short-term sickness of the 12.5 million workers covered by these five programs was \$1,512 million or 23 percent of all such income loss and 28 percent of the loss of wage and salary workers.

These public programs of sick leave and cash insurance apply to an income loss of \$2.3 billion, 42 percent of the estimated loss of income from sickness among all wage and salary workers. Wage and salary workers not

Table 1.—*Estimated income loss from nonoccupational short-term sickness,¹ by type of employment, 1948-55*

[In millions]

Year	Total	Wage and salary workers				Self-employed persons ⁴
		Total ²	Federal, State, and local government employees ³	Employees covered by temporary disability insurance laws ⁴	Other ⁵	
1948	\$4,620	\$3,575	\$409	\$482	\$2,684	\$1,054
1949	4,536	3,599	462	626	2,511	937
1950	4,935	3,943	480	1,109	2,354	992
1951	5,555	4,435	570	1,235	2,630	1,120
1952	5,876	4,754	647	1,316	2,791	1,192
1953	6,142	5,067	684	1,398	2,985	1,075
1954	6,128	5,075	716	1,413	2,946	1,053
1955	6,568	5,497	783	1,512	3,202	1,071

¹ Short-term or temporary non-work-connected disability (lasting not more than 6 months) and the first 6 months of long-term disability. Slight differences from previously published estimates for the years 1948-54 result from revisions in source data.

² Average annual earnings per wage worker from *Survey of Current Business, National Income Supplement, 1954*, edition and *National Income Number, July 1956*, table 27 (Department of Commerce), divided by 255 workdays in a year and multiplied by 7 days. Resulting income loss per worker multiplied by annual average employment obtained from *Current Population Reports: Annual Report on the Labor Force*, Series P-50, Nos. 13, 19, 31, 40, 45, 59, and 67 (Bureau of the Census).

³ Excludes members of the Armed Forces. For Federal employees, obtained by dividing mean income (as reported in *Pay Structure of the Federal Civil Service, Annual Reports*, Federal Employment Statistics Office, U. S. Civil Service Commission) by

253 and multiplying by 8 days, then multiplying the result by the number of employees on June 30 of each year (as in source cited). For State and local government employees, obtained by dividing average annual earnings (as reported in the *Survey of Current Business, National Income Number, July 1956*, table 27) by 255 and multiplying by 8 days, then multiplying the result by the number of employees (as reported in *Public Employment in October, 1948-54*, and *State Distribution of Public Employment in 1955*, O-GE55-No. 2, Bureau of the Census).

⁴ Average annual wage of such employees divided by 255 and multiplied by 7 and then multiplied by the mean employment each year.

⁵ Represents the difference between the estimated totals for all wage earners and for those in government employment or covered by temporary disability insurance laws.

⁶ Same method and sources as for wage and salary workers (footnote 2).

included in the public programs had an estimated income loss of more than \$3.2 billion. Many of them were covered by voluntary provisions, which include both sick-leave provisions and cash sickness insurance.

A fourth group that may incur income loss is the self-employed. The provisions they make for replacing income lost because of temporary disability are necessarily different from the group provisions available to wage and salary workers. Self-employed persons had an estimated income loss from short-term sickness during 1955 of \$1,071 million or 16 percent of all income loss. This group is separately identified because they are not eligible for group insurance.

Protection Against Income Loss

In tables 2-6, four forms of protection against income loss caused by temporary disability are considered—private arrangements through insurance companies or self-insured cash

sickness programs, insurance company coverage required by law, publicly operated funds, and sick-leave programs. All are classified as formal arrangements for protection against income loss—whether provided through insurance companies or through self-insurance programs by means of sick leave or cash sickness benefits. Although some employers make informal arrangements for continuation of salary, this article considers only those formal arrangements designed to offer specified amounts of protection against income loss resulting from short-term disability.

Private Insurance

Insurance sold by private carriers to provide for replacing part of the income loss due to sickness may be voluntarily provided by employers or purchased by employees, it may result from collective bargaining for fringe benefits, or it may be written in com-

Table 2.—Premiums and benefit payments for private insurance against income loss, 1948-55¹

[In millions]

Year	Type of private insurance							
	Total	Under voluntary provisions				Under public provisions		
		Total	Group	Individual	Other ²	Total	Group	Other ³
Insurance premiums								
1948	\$544.9	\$531.8	\$162.1	\$346.0	\$23.7	\$13.1	\$12.8	\$0.3
1949	588.0	548.9	177.6	352.0	19.3	39.1	32.4	6.7
1950	670.9	593.5	219.3	355.0	10.2	77.4	64.6	12.8
1951	777.2	627.5	249.6	361.0	16.9	149.7	122.8	26.9
1952	852.7	690.8	266.2	399.4	25.2	161.9	132.9	29.0
1953	1,001.2	813.0	295.6	478.0	39.4	188.2	159.1	29.1
1954	1,064.2	876.9	321.6	516.3	39.0	187.3	156.9	30.4
1955	1,107.6	924.8	345.4	526.7	52.7	182.8	152.5	30.3
Benefit payments								
1948	\$278.0	\$268.7	\$114.9	\$139.0	\$14.8	\$9.3	\$9.1	\$0.2
1949	312.0	284.9	124.3	148.0	12.6	27.1	22.7	4.4
1950	374.0	319.8	156.8	151.0	12.0	54.2	46.2	8.0
1951	474.4	361.1	196.7	154.0	10.4	113.3	96.8	16.5
1952	536.0	408.2	218.3	173.4	16.5	127.8	108.8	19.0
1953	586.6	446.4	221.4	196.6	28.4	140.2	119.2	21.0
1954	615.6	479.1	233.5	216.6	29.0	136.5	113.9	22.6
1955	643.3	505.8	255.7	217.8	32.3	137.5	115.0	22.5

¹ Premiums and losses as reported by the Health Insurance Council for the United States, by type of insurance benefit, adjusted (a) to include accidental death and dismemberment provisions in policies that insure against income loss to offset understatement arising from omitting current short-term income-loss insurance in automobile, resident liability, life, and other policies and (b) to remove data for fraternal societies, shown with "other" forms of income-loss insurance in this table. For detailed methodology on the separation of group and individual accident and health insurance into its components—wage loss, hospitalization, and surgical and medical care—see footnotes to table 2, page 4, *Social*

Security Bulletin, December 1954.

In dividing group insurance premiums into those provided under private provisions and those provided in compliance with public laws, some estimating of self-insurance was necessary.

Loss ratios applicable to all group insurance were applied to the benefits under private auspices and under public laws to obtain the premiums applicable to each.

² Fraternal-society, union-management trust fund, trade-union, and mutual benefit association plans.

³ Self-insured operations and some union and union-management plans under California, New Jersey, and New York laws.

Table 3.—Benefit payments under temporary disability insurance laws provided through private auspices and through publicly operated funds, 1948-55¹

[In millions]

Year	Total	Type of insurance arrangement		
		Private auspices ²		Publicly operated funds
		Group insurance	Self-insurance ³	
1948	\$66.4	\$9.1	\$0.2	\$57.1
1949	89.2	22.7	4.4	62.1
1950	117.4	46.2	8.0	63.2
1951	174.2	96.8	16.5	60.9
1952	202.3	108.8	19.0	74.5
1953	231.8	119.2	21.0	91.6
1954	239.4	113.9	22.6	102.9
1955	245.1	115.0	22.5	107.6

¹ Programs under the Railroad Unemployment Insurance Act and the laws of Rhode Island, California, New Jersey (beginning in 1949), and New York (beginning in 1950). Excludes hospital benefits for California and hospital, surgical, and medical benefits in New York. Data for 1948, *Social Security Yearbook, 1948*; for 1949-54, *Social Security Bulletin*, September 1950 through 1955; for 1955, *Annual Statistical Supplement, 1955* (*Social Security Bulletin*).

² Under the laws of California, New Jersey, and New York.

³ Employers may self-insure by observing certain stipulations of the law. Also includes some union plans whose provisions come under the laws.

pliance with the State temporary disability insurance laws of California, New Jersey, and New York. Table 2 shows separately the insurance written under voluntary and that written under public provisions.

Premiums for private insurance providing for cash replacement of lost income amounted to \$1.1 billion in 1955, \$43 million more than in 1954. This increase in the volume of premiums was less than that in any previous year in the series since 1949.

Benefit payments amounted to \$643 million in 1955, more than double the total of \$278 million in 1948 but only \$28 million more than in 1954; this was the smallest expansion recorded in any year in the series. Private group insurance, whether under voluntary or public auspices, accounted for 58 percent of the 1955 benefits, and individual insurance equaled 34 percent; self-insurance and other miscellaneous forms of cash benefits amounted to 8.5 percent of the total benefits paid.

Benefits paid by private insurance companies under the public provisions of California, New Jersey, and New York amounted to \$115 million and equaled 20 percent of the total

benefits (\$588 million) paid by insurance companies in 1955.

Public Provisions

Information about benefits paid under the four State temporary disability programs and under the cash sickness provisions of the Railroad Unemployment Insurance Act is summarized in table 3. In 1948, when only three of these programs were in operation, benefits totaled \$66 million; in 1955, under all five programs, they aggregated \$245 million. Since 1953 there has been relatively little expansion in the benefits. Group insurance was apparently more affected by the decline in employment in 1954 than were the self-insured arrangements and the State funds, and benefits under group insurance contracts had not returned in 1955 to their 1953 level. Of total benefits provided in 1955, 47 percent were from group insurance contracts, in contrast to 51 percent in 1953.

Paid Sick Leave

The number of persons covered by paid sick-leave provisions in 1955 has been placed at 10.8 million—an increase of 100,000 from 1954. The Health Insurance Council estimates that about 2.4 million of this group are included in formal arrangements providing sick leave supplemented by a group insurance policy. According to this source, 200,000 more persons were provided with dual coverage in 1955 than in 1954. The number of persons who on their own initiative purchased an individual accident and health policy supplementing their formal sick-leave plan is not known.

With certain qualifications caused by gaps in the available data, table 4 provides an indication of the value of prevailing sick-leave provisions.⁸ In 1955 paid sick leave was valued at slightly less than \$800 million, about 75 percent above its 1948 value of \$451 million. Since the value of paid sick leave is allied to the wages and salaries it replaces, it is more closely related to 1948-55 increases in per capita earnings than are other forms of protection against income

⁸ For a discussion of available information on sick-leave provisions, see the *Bulletin*, January 1956, pages 3-4.

Table 4.—*Estimated value of paid sick leave in private industry and in Federal, State, and local government employment, 1948-55*

[In millions]

Year	Total	Workers in private industry ¹			Government workers		
		Total	Not covered by temporary disability insurance laws	Covered by temporary disability insurance laws ²	Total	Federal ³	State and local ⁴
1948	\$450.6	\$207.1	\$191.4	\$15.7	\$243.5	\$152.8	\$90.7
1949	492.5	210.9	189.9	21.0	281.6	178.2	103.4
1950	517.1	226.4	190.4	36.0	290.7	176.8	113.9
1951	619.5	259.1	217.7	41.4	360.4	228.9	131.5
1952	693.2	278.3	233.6	44.7	414.9	263.0	151.9
1953	726.5	287.6	241.5	46.1	438.9	270.6	168.3
1954	742.9	293.2	245.9	47.3	449.7	262.3	187.4
1955	797.9	303.6	255.2	48.4	494.3	291.5	202.8

¹ Sum of estimated value of paid sick leave for employees with (a) sick leave but no other protection and (b) group insurance supplemental to sick leave. Under each category, number of employees was adapted from *Annual Survey of Accidents and Health Coverage in the U. S., 1948-54* and *The Extent of Voluntary Health Insurance Coverage in the United States as of Dec. 31, 1955* (Health Insurance Council). Average annual earnings per full-time employee from *Survey of Current Business, National Income Supplement*, 1954 edition, and *National Income Number*, July 1956, table 27 (Department of Commerce). It is assumed that in private industry there are 255 working days a year and that workers receive an average of 4 days of paid sick leave a year exclusive of other protection and 3.2 days when they also have group insurance.

² Assumes that some workers entitled to cash benefits under temporary disability insurance laws would have sick leave in addition to their benefits under the laws, but only to the extent needed to bring up to 80 percent the replacement of their potential wage loss.

³ The number of employees on the Federal payroll as of June 30 of each year and mean income for each year from *Pay Structure of the Federal Civil Service, Annual Reports* (Federal Employment Statistics Office, U. S. Civil Service Commission). Data refer

to paid civilian full-time employees in the Executive branch of the Federal Government in the continental United States. More than 99 percent of these employees are covered by paid sick-leave provisions. The 1-percent overestimate is offset by the exclusion of judicial and legislative Federal employees with sick-leave provisions. Federal employees work 253 days a year, and their paid sick-leave benefits, which cover 7.8 days on the average, therefore equal 3.1 percent of payroll for the continental United States.

⁴ Number of full-time employees on State and local government payrolls from *Public Employment in October, 1948-54* and *State Distribution of Public Employment in 1955*, G-GE55-No. 2 (Bureau of the Census). On the basis of various studies, it has been assumed that the number of State and local employees covered by sick-leave plans has increased gradually from 65 percent of the total number employed in 1948 to 76 percent in 1955. Average annual earnings per full-time employee from the *Survey of Current Business, National Income Supplement*, 1954 edition, and *National Income Number*, July 1956, table 27. It is assumed that in State and local government employment there are 255 working days a year and that there are 4.4 days of paid sick leave a year per worker on the payroll.

loss. Only a part of the expansion in the 8 years is therefore attributable to the increase in the number of persons eligible for sick leave, which rose 27 percent in the period under review.

More than 60 percent of current sick leave, as measured here, is provided for government employees; 36 percent was attributable to the Federal Government's sick-leave provisions. The value of the sick leave available to Federal employees has almost doubled in the period under review, and that provided State and local employees has more than doubled; the estimated income loss due to sickness among these two groups of employees has not quite doubled in the same period. Among workers in private industry the value of sick leave has increased about 47 percent. More protection was provided in 1955 to the workers of this country through sick leave than through cash sickness benefits—\$798 million compared with \$751 million.

Some workers are entitled to both sick leave and cash sickness insurance. In measuring the value of sick leave in alleviating the potential income loss of workers with this form of protection, the additional protection afforded by their group insurance should be taken into account. Table 5 indicates the extent of protection afforded workers with sick leave, distinguishing between those with and those without supplementary group cash sickness insurance. It thus serves two purposes—determining the extent of protection afforded persons covered by sick-leave provisions, and identifying their income loss.

Among persons with sick leave as their only protection, approximately 65 percent of their potential loss of income in 1955 was met through sick leave. For those with both sick leave and group insurance, it is assumed that 80 percent of this loss was met. For the two groups combined, their

Table 5.—Estimated value of potential income loss¹ due to short-term sickness and of paid sick leave and insurance among workers covered by paid sick leave, 1948-55

Item	1948	1949	1950	1951	1952	1953	1954	1955
[Amounts in millions]								
Potential income loss...								
Value of sick leave ...	\$720.9	\$763.0	\$764.6	\$883.8	\$935.8	\$957.2	\$979.1	\$1,041.1
Value of sick leave and insurance ...	443.6	478.3	479.3	566.0	610.6	626.5	635.1	681.8
Ratio (percent) of benefits to potential income loss...	61.5	62.7	62.7	64.0	65.2	65.5	64.9	65.5
For workers with sick leave only								
Potential income loss...								
Value of sick leave and insurance ...	\$17.6	\$35.7	\$94.3	\$133.6	\$206.6	\$250.1	\$269.4	\$290.3
Value of sick leave and insurance ...	14.0	28.6	75.5	106.9	165.3	200.1	215.5	232.2
For workers with sick leave and disability insurance ²								
Potential income loss...								
Value of sick leave and insurance ...	\$738.4	\$798.8	\$859.0	\$1,017.5	\$1,142.4	\$1,207.3	\$1,248.5	\$1,331.3
Value of sick leave and insurance ...	457.6	506.9	554.8	672.9	775.8	826.6	850.6	914.0
Ratio (percent) of benefits to potential income loss...	62.0	63.5	64.6	66.1	67.9	68.5	68.1	68.7
All workers under sick-leave plans								

¹ Estimated total loss, whether protected by sick leave and insurance or not.

² Understated, since no benefits from the purchase of individual insurance policies are included as protection.

³ Estimates of the number of workers with dual protection based on Health Insurance Council data.

⁴ The supplementary protection derived from insurance was assumed to be at a level that would, in combination with sick leave, replace 80 percent of the potential income loss. Since sick leave had been estimated at 40 percent, one-half the amounts shown represents insurance payments.

protection equaled 69 percent of their potential loss of income.

Summary of Protection Provided

To determine the total value of all forms of protection against income loss due to nonoccupational illness, data from tables 2, 3, and 4 have been summarized in table 6.

The dollar value of all forms of protection rose from \$786 million in 1948 to \$1,549 million in 1955. Benefits under voluntary provisions (including insurance company policies,

self-insurance, and sick leave for nongovernmental employees but excluding private insurance under public laws) accounted for \$476 million in 1948 and \$809 million in 1955. Benefits under public auspices, either through the temporary disability insurance laws or as sick leave granted government employees, equaled \$310 million in 1948 and 8 years later it equaled \$739 million. Benefits under public auspices increased 139 percent; those under voluntary provisions increased 70 percent in the 8-year period.

Table 6.—Benefits provided as protection against income loss, summary data, 1948-55

Year	Total	Under voluntary provisions			Under public provisions			
		Total	Cash sickness insurance and self-insurance	Sick leave	Total	Publicly operated cash sickness funds	Cash sickness insurance and self-insurance	Sick leave for government employees
1948	\$785.7	\$475.8	\$268.7	\$207.1	\$309.9	\$57.1	\$9.3	\$243.5
1949	866.6	495.8	284.0	210.9	370.8	62.1	27.1	281.6
1950	954.3	546.2	319.8	226.4	408.1	63.2	54.2	290.7
1951	1,154.8	620.2	361.1	259.1	534.6	60.9	113.3	360.4
1952	1,303.7	686.5	406.2	278.3	617.2	74.5	127.8	414.9
1953	1,404.7	734.0	446.4	287.6	670.7	91.8	140.2	438.9
1954	1,461.4	772.3	479.1	293.2	689.1	102.9	136.5	449.7
1955	1,548.8	809.4	505.8	303.6	739.4	107.6	137.5	494.3

Measuring the Extent of Protection

The growth in security against income loss from illness (table 7) can be determined from the data for 1948-55 on income lost because of illness and on the dollar value of various forms of protection against this loss. When the income loss experienced each year (table 1) is related to the protection provided (table 6), protection as a percent of income loss can be determined. The secondary cost resulting from the operation of the mechanism of providing cash disability insurance is also shown in table 7.⁴ The net cost of providing insurance represents the difference between the insurance benefits and premiums (table 2), plus the cost of administering the public temporary disability insurance programs (not shown elsewhere).

Between 1948 and 1955, total income loss increased 42 percent, but the protection provided showed a 97-percent increase. As a result, the income loss not protected rose only 31 percent in the same period. The protection covered 24 percent of the loss in 1955, in contrast to only 17 percent in 1948. The net cost of providing the cash portion of the protection also advanced as insurance became more widespread, reaching \$473 million in 1955. The higher loss ratios prevailing in cash disability insurance in the most recent years in the series resulted in an increase of only 75 percent in the net costs of providing the cash disability insurance, compared with an increase of 124 percent in the cash insurance benefits paid, in the 8-year interval.

In considering the extent of income-loss protection available to various types of workers, wage and salary workers should properly be considered separately from the self-employed. Benefits from individually purchased cash sickness policies cannot be separated, however, into those going to the self-employed or to non-workers and those that augment the other protection available to wage and salary workers. The data therefore

⁴ The costs of operating sick-leave programs, which employers absorb, are not known.

Table 7.—Growth in protection against income loss, 1948–55

[Amounts in millions]

Year	Income loss and protection provided			Net cost of providing insurance ³
	Income loss ¹	Protection provided ²	Protection as percent of loss	
1948	\$4,629	\$786	17.0	\$3,843
1949	4,536	867	19.1	3,669
1950	4,935	954	19.3	3,981
1951	5,555	1,155	20.8	4,400
1952	5,876	1,304	22.2	4,572
1953	6,142	1,405	22.9	4,737
1954	6,128	1,461	23.8	4,667
1955	6,568	1,549	23.6	5,019
				473

¹ From table 1.

² From table 6. Includes sick leave.

³ Includes retention costs (for contingency reserves, taxes, commissions, acquisition, claims settlement, and underwriting gains) of private insurance companies (from table 2) and administrative expenses for publicly operated plans and for supervision of the operation of private plans.

include both the benefits from individually purchased cash sickness policies and the estimated income loss of the self-employed. The estimated loss of income as it applies to all income producers is a useful measure for some aspects of this area of study of the costs of sickness.

It is also of interest to examine that portion of the residue of lost income that might conceivably be recovered if insurance policies and sick-leave plans were more widespread and if all benefits were more nearly at the relatively high level of some plans. Though the income that the wage earner fails to receive because he is ill represents a loss to the national income, the individual worker's expenses for working, his income taxes, and his social security contribution are reduced and therefore he suffers only a part of this loss directly.⁵

Most insurance and many sick-leave plans undertake to compensate for only a part of the income lost; they are not intended to apply to medical expenses and, by paying less than a

⁵ It must also be recognized that the worker may encounter medical expenses for his illness that, unless met by other than out-of-pocket expenditures—by prepaid health insurance, for example—may be greater than any savings that accrue on carfare, meals, clothing, or taxes while he is ill.

"take home" wage, are designed to discourage malingering. In addition, insurance policies usually do not cover the first few days or first week of illness, since it is believed that the worker can carry this loss himself, and the administrative load is greatly reduced. The potentially insurable and the potentially compensable income loss of the Nation is therefore somewhat less than the total income loss so far considered.

To obtain hypothetical figures that can meaningfully represent the portion of the income loss due to sickness that might conceivably be covered by prevailing insurance provisions, the data properly must be confined to persons not covered by sick leave. Sick leave applies to the first few days of illness as well as the later days and also usually provides for 100 percent of wage continuation for the period covered by the sick leave rather than some lower amount.

Table 8 compares cash disability benefits with the full income loss of all persons who do not have sick-leave protection and shows the portions of their potentially insurable and potentially compensable income loss that would be met by existing insurance benefits.

Income loss for persons not covered by sick leave increased from \$3.9 billion in 1948 to \$5.2 billion in 1955. Applicable insurance benefits amounted to \$328 million in 1948 and \$635 million in 1955. Insurance, which equaled 8.4 percent of the total

income loss in 1948, had increased to more than 12 percent by 1954 and remained at about the same level in 1955. When the first 3 days of sickness are excluded from the measure of income loss, by omitting 30 percent of the total, insurance was meeting 17 percent in 1955. This proportion might be looked on as a measure of the protection currently being provided in relation to a potentially insurable income loss, since some insurance is already being written with only a 3-day waiting period enforced. If the first 7 days of income loss, equivalent to 50 percent of the total income loss, are excluded, insurance was meeting 24 percent of this amount in 1955, compared with 17 percent in 1948.⁶

A third type of adjustment was also made in table 8 to obtain the ratio of existing protection to potentially compensable income loss. Potentially insurable income loss, with a waiting period of either 3 days or 7 days, can be further reduced by as much as a third; the two-thirds remaining represents the portion of income that might be compensated according to a reasonable standard. Insurance in 1955 was meeting approximately 36 percent of this theoretical benchmark—about 11 percentage points higher than in 1948.

⁶ There is a slight degree of overstatement when the insurance benefits are compared with this concept of income loss, since some of the current insurance benefits begin with the fourth day.

Table 8.—Estimates of extent of income-loss protection for workers without sick leave, 1948–55

[Amounts in millions]

Item	1948	1949	1950	1951	1952	1953	1954	1955
Insurance benefits ¹	\$328	\$360	\$399	\$482	\$528	\$578	\$610	\$635
Total income loss ²	3,891	3,737	4,076	4,538	4,734	4,935	4,880	5,237
Ratio (percent) of insurance benefits to:								
Total income loss	8.4	9.6	9.8	10.6	11.2	11.7	12.5	12.1
Income loss excluding first 3 days ³	12.0	13.8	14.0	15.2	15.9	16.7	17.9	17.3
Two-thirds of income loss excluding first 3 days	18.1	20.6	21.0	22.8	23.9	25.1	26.8	26.0
Income loss excluding first 7 days ⁴	16.9	19.3	19.6	21.2	22.3	23.4	25.0	24.2
Two-thirds of income loss excluding first 7 days	25.3	28.9	29.4	31.9	33.5	35.1	37.5	36.4

¹ Excludes sick leave and estimated amount of insurance benefits of persons with both sick leave and group insurance provided by their employers. (See table 5, footnote 3.)

² Excludes all income loss of persons covered by

sick-leave plans. (Line 7, table 5.)

³ Based on 70 percent of total income loss (line 2 above).

⁴ Based on 50 percent of total income loss (line 2 above).

Private Employee-Benefit Plans Today

by JOSEPH ZISMAN*

On the twentieth anniversary of the Social Security Act, the Secretary of Health, Education, and Welfare said, "The combined protective forces of individual self-reliance, the private company thrift and pension plans, and the Federal social security programs now go far toward assuring the economic and social independence of American families. These forces help prevent or alleviate dependency and its train of hardships, afford better opportunity for the Nation's children, and help sustain the general welfare of our people." The Federal program of old-age and survivors insurance, the Secretary went on to say, "stimulates individual thrift and initiative; it does not replace them." Among the forms private initiative has taken are the employee-benefit plans sponsored and initiated unilaterally or jointly by employers and trade unions. This article describes the current status of such plans, their growth, and their characteristics.

EMPLOYEE-benefit plans have had an astonishing growth in the past decade, spurred as they have been by such factors as wartime economic expansion, wage stabilization, favorable tax treatment, broadening areas of collective bargaining, high prosperity, and the desire for greater employer-employee harmony. During this period large numbers of employee pension and health and welfare plans were initiated, and existing plans increased their coverage, liberalized their benefits, or did both.

The plans are of two types, which often, however, cover the same workers. The health and welfare plans are designed to provide life insurance, disability insurance, and hospital, surgical, and medical expense insurance or health services. The pension plans pay benefits on retirement because of old age or permanent disability.

Although there are no comprehensive statistics, an idea of the growth and coverage of these plans can be obtained from group insurance and related statistics. These have been recently assembled by a subcommittee of the Senate Committee on Labor and Public Welfare. Moreover, the subcommittee has made certain estimates and projections from these sta-

tistics. Its final report thus becomes a useful source of data on this subject.¹

The growth from 1945 to 1955 of group insurance provided by the employee-benefit plans is shown in table 1. Coverage under group life insurance increased more than 2.8 times, and the amount of insurance in force almost 4.6 times. Group hospital expense insurance and private pension plans had a similar growth.

The Senate subcommittee estimated that in 1954 employee-benefit plans, providing a variety of benefits, covered more than 31 million workers and afforded protection for 45 million dependents (table 2). Supplementary unemployment benefits—a new form of protection—are estimated to have covered almost 2 million workers in October 1956, according to unpublished figures of the Bureau of Labor Statistics.

Employer contributions to private pension and welfare plans are estimated by the Department of Commerce to have risen from approximately \$4.0 billion in 1952 to more than \$5.3 billion in 1955, or from 2.6 percent of wages and salaries in private industry in 1952 to 3.1 percent

in 1955.² In 1954, according to the estimates of the Senate subcommittee, employers and employees together contributed about \$6.8 billion to finance the plans (employers, more than \$4.5 billion; employees, more than \$2.3 billion). Reserves of the pension funds were estimated as aggregating probably as much as \$25.0 billion.

Employee-benefit plans, the Senate subcommittee pointed out, have the same general objectives as the Federal and Federal-State social security programs. Private pension plans are supplementary to the basic Federal old-age and survivors insurance system. Not only are they designed to add to the employee's retirement income, but many of them will supplement the new Federal benefits for permanent and total disability occurring before normal retirement age when these benefits become payable on July 1, 1957. Group life insurance and other death benefits supplement the survivor benefits provided under the Social Security Act. Temporary disability benefits, as distinguished from workmen's compensation benefits, are now payable under the laws of only four States. In Rhode Island the benefits are provided exclusively by a publicly operated plan. In California, New Jersey, and New York the benefits may be provided through the State-operated insurance fund plans or through private plans, in which case they tend to be somewhat higher than the statutory requirements. In other States the private employee-benefit plans constitute a voluntary approach to the problem of income maintenance during periods of loss of earnings due to illness or accidents. In some instances the plans supplement the benefits provided under workmen's compensation laws. The only State that provides a form of health insurance, other than workmen's compensation, under a public program is California, where

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¹ *Welfare and Pension Plans Investigation: Final Report of the Committee on Labor and Public Welfare Submitted by Its Subcommittee on Welfare and Pension Funds* (S. Rept. 1734, 84th Cong., 2d sess., 1956).

² *Survey of Current Business, National Income Number, July 1956*, pages 16 and 22.

hospitalization benefits are financed from contributions for temporary disability insurance. Employee-benefit plans pay hospital expense and other medical benefits to a large segment of the population. The year 1955 saw the development of employer-trade union agreements for the supplementation of unemployment benefits provided through the Federal-State unemployment insurance programs.

Plan Sponsorship and Administration

As far back as 1831 a printers' union in New York City paid weekly unemployment benefits to its members. The American Express Company established the first industrial pension plan in 1875. At about the same time, employee mutual benefit associations—usually providing sickness benefits—were established. Employers began to establish group life insurance plans in 1910. The first collectively bargained health and welfare plan was negotiated in 1926 by the Amalgamated Association of Street and Electrical Railway Employees and the Chicago Rapid Transit Company. Table 3 shows the percentages of workers covered under

welfare and pension plans with different types of administrative arrangements.

Impact of Collective Bargaining

Originally, most plans were sponsored and administered by employers. When an employer sponsors an employee-benefit plan, he alone decides on the class of employees to be covered, the type and amount of benefits, the conditions under which the benefits are paid, and the method of financing, underwriting, and administration. He may change, or even discontinue, the plan at will.

With the development of collective bargaining, the unions acquired a say in these matters. Decisions of the National Labor Relations Board and of the courts in 1949 established the rights of the unions in this area. When a legally constituted bargaining agent represents employees, the employer is legally bound to bargain with the agent on the initiation, modification, or abandonment of any employee-benefit plan. As a result, many collective-bargaining agreements have been entered into by employers and trade unions that call for the initia-

Table 2.—Estimated coverage under private employee-benefit plans, by type of benefit, December 31, 1954

[In millions]

Type of benefit	Total	Employees	Dependents
Life insurance and death benefits	30.6	29.5	1.1
Accidental death and dismemberment	14.0	14.0	-----
Temporary disability	23.2	23.2	-----
Hospitalization	75.6	31.3	44.3
Surgical	67.3	28.3	39.0
Medical	38.7	17.3	21.4
Retirement ¹	12.5	12.5	-----

¹ Excludes annuitants.

Source: *Welfare and Pension Plans Investigation* (S. Rept. 1734), p. 11.

tion of an employee benefit plan. Others have modified a plan's provisions with respect to coverage, benefits and/or employer contributions. Still others simply provide that the plan cannot be changed during the life of the agreement. According to the Bureau of Labor Statistics, of the settlements concluded during 1955 that involved 1,000 or more workers, about two-fifths called for the modification or introduction of such plans. More than half of the 7.1 million workers concerned in these settlements were affected by the agreements.³

Most employees and their dependents, however, are covered by plans that have not been brought within the scope of collective-bargaining agreements. The Senate subcommittee estimated that at the end of 1954 only 12 million of the more than 31 million employees covered under welfare plans were in plans within the scope of such agreements. For pension plans, the estimates are 7.2 million employees out of 12.5 million.

Employer-Administered Plans

In employer-administered (unilateral) plans the employer performs all the necessary functions to carry out the provisions of the plan. Even when the union has a voice in the selection of the insurance carrier, the employer conducts all transactions with the carriers. Once the decisions on the plan provisions and the ex-

Table 1.—Growth of group insurance in private employee-benefit plans, by type of insurance, selected years, 1945-55

Item	End of year—			
	1945	1950	1954	1955
Group life insurance ¹				
Number of master policies	30,000	56,000	81,000	89,000
Individuals covered (thousands) ²	11,451	19,391	28,634	32,098
Insurance in force (millions)	\$22,172	\$47,793	\$86,395	\$101,300
Group hospital expense insurance				
Individuals covered:				
Insurance companies (thousands) ³	7,803	22,305	35,010	38,116
Blue Cross plans (thousands) ³	18,881	37,451	44,201	47,734
Private retirement plans				
Number of plans ⁴	7,425	12,330	21,000	23,000
Individuals covered (thousands) ⁵	5,600	8,600	12,500	13,300

¹ Excludes group credit and wholesale employee insurance.

² Employees and dependents, with minor exceptions.

³ Includes individual and group enrollment. About three-fourths are employees and their dependents, enrolled in groups.

⁴ Insured and self-insured plans; excludes "pay as you go" plans.

⁵ In insured and self-insured plans, including "pay

as you go" plans; for 1954 and 1955, excludes annuitants.

Source: Data for life insurance and hospitalization insurance covered by insurance companies, Life Insurance Association of America; for Blue Cross plans, Blue Cross Commission of the American Hospital Association; for private pension plans, estimated by the Division of the Actuary and the Division of Program Research, Office of the Commissioner, Social Security Administration.

³ Bureau of Labor Statistics, *Current Wage Developments*, No. 98, February 1, 1956, pages ii and vii.

tent of employer financing have been made, the responsibility for the plan's operations is his. The day-to-day operation of the plan may be lodged in the industrial relations department or the treasurer's office. Sometimes—most commonly in pension plans—a special committee on which employees are occasionally represented is set up to make policy decisions. When trust funds are created, trust companies are usually given the investment functions and, in pension plans, handle the benefit payments in accordance with the sponsor's instructions. In all self-insured plans, the employers assume the underwriting functions of the insurance carrier and the adjudication of claims as well. Approximately 92 percent of the workers covered under welfare plans and 86 percent of those covered under pension plans in 1954 were in single-employer-administered plans (table 3).

Trade Union Plans

Trade union plans include (1) those that are union-sponsored and originally financed entirely out of union dues and assessments and (2) plans created by collective-bargaining agreements and financed in whole or in part by employer contributions but administered entirely by the unions.

The first type is found largely in unions originally affiliated with the American Federation of Labor. The benefit structure and method of financing are generally specified in the bylaws of the international or local union sponsoring the benefits. The plans tend to be self-insured. No adequate statistics exist on these plans, but the last report (December 1955) of the American Federation of Labor shows 75 international unions, with a combined membership of about 8.1 million, that paid benefits in 1954. Excluding the "miscellaneous" category, which includes such benefits as strike benefits, these unions paid approximately \$88.1 million. With the advent of collective bargaining for welfare and pension plans, many of these plans have become financed in whole or in part by employer contributions and therefore have changed their structure. Plans of probably as many as 12 unions with a total mem-

Table 3.—Percentage distribution of employees covered by private employee-benefit plans, by type of administrative arrangement, 1954

Administrator	Welfare plans	Pension plans
Total.....	100.0	100.0
Employer.....	92.0	86.0
Union.....	.5	.5
Union and employer jointly:		
Single-employer fund.....	.5	.5
Multi-employer fund.....	7.0	13.0

Source: S. Rept. 1734, p. 14.

bership of about 3.4 million fall in this group. The coverage resulting from union membership dues and assessments alone may therefore be estimated at approximately 4.7 million. The number of employees relying entirely on their unions for welfare and pension benefits is considerably less, since most of the unions involved have negotiated plans with employers. Death and sickness benefits are those most frequently provided by the unions.

The second group of plans includes funds administered solely by unions and set up before the passage of the Taft-Hartley Act (and excluded from its provisions) and those that do not have an interstate aspect. It also includes a number of plans set up under arrangements whereby an insurance policy is issued to a union as policyholder; the employer pays the full premium (or his share) directly to the insurance carrier, and the union is the sole administrator of the plan.

In both groups of plans, the unions' functions are the same as those of employers in the employer-administered plans.

Employee-Benefit Associations

Employee-benefit associations are generally found in large firms. Usually, they are limited in membership to the employees of one establishment so that several associations may be found in one multi-unit firm. They are organized by the employees, sometimes with the encouragement of the employer. The amount of employee contribution, the type and amount of benefit, and the conditions under which benefits are paid are specified in the association's bylaws.

The employer's participation is usually limited to making certain administrative facilities available, collecting dues, and sometimes auditing the books. The benefits are generally self-insured. Sickness benefits are those most frequently provided.

At one time these associations were an important factor in the employee-benefit picture, but with the development of group insurance and the advent of collective bargaining in this area they have decreased in importance. From 1947 to 1954 the membership is believed to have declined from 1,460,000 to 800,000.

Employee-benefit associations have their own constitutions and bylaws and are operated through elected boards of directors and officers, on which management is occasionally represented. Day-to-day operations are usually handled by a paid manager or secretary.

Joint Employer-Trade Union Plans

The jointly sponsored plan may involve only a single employer and a trade union local. More often, however, it is designed to make possible economical coverage of the employees of small employers in an entire industry (for example, the United Mine Workers Welfare and Retirement Fund in the bituminous coal industry), in an industry within an area (the Hotel Trades Welfare Fund in New York City), or, less frequently, in an area in which employers in various industries bargain with the same union (the Toledo Plan). Some plans take in not only the employees of many employers but also, as in the hotel trades, the members of several local craft unions in an industry or of several locals in an international union, as in the ladies' garment industry. Though some of these plans may have replaced or, in the case of single-employer plans, modified an existing plan, most of them provide coverage in firms where none previously existed.

In such arrangements the employers enter into a collective bargaining agreement with the union under which they contribute to a fund so many cents per employee-hour worked or per unit of produc-

tion, or a specified percent of their payrolls. When the plan includes one employer only, the fund may be supervised by a committee or by a board of trustees. In multi-employer arrangements, the fund is supervised by a board of trustees. In both instances, management and the unions are equally represented, as required by the Taft-Hartley Act. The plans also provide for neutral trustees or for the appointment of neutral persons in the event of a deadlock. The trustees decide the types and amounts of benefits, the manner in which they are to be underwritten, and the selection of the underwriter. They appoint a salaried manager to handle day-to-day operations, which are no different from those of any other type of plan except that the multi-employer plans must provide machinery for collecting contributions from the participating employers and for maintaining the employee records.

Method of Underwriting

Most death benefits and temporary disability and health benefits are underwritten by insurance carriers (table 4). The retirement benefits are often self-insured. Insurance carriers are of three types: commercial carriers, Blue Cross and Blue Shield plans, and independent plans.

Death Benefits and Temporary Disability and Health Insurance Benefits

Commercial insurance carriers.—Most commercial carriers underwrite all types of cash benefits on a group basis and operate more or less nationally. A number of companies, however, write only casualty insurance.

Blue Cross, Blue Shield, and other medical-society-sponsored plans.⁴—A distinctive feature of these plans is that they generally provide service benefits rather than fixed cash benefits. Within the limits of their contracts, the Blue Cross plans provide hospital accommodations and other hospital services. The Blue Shield and other medical-society-sponsored

Table 4.—*Estimated employee coverage of employee-benefit plans by type of benefit and method of underwriting, December 31, 1954*

[Numbers in thousands]

Type of benefit	Employees covered by plans insured through—							
	Total		Commercial insurance ¹		Blue Cross or Blue Shield ²		Self-insurance	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Life insurance and death benefits	29,476	100.0	27,476	93.2	—	—	2,000	6.8
Accidental death and dismemberment	13,972	100.0	13,972	100.0	—	—	4,900	21.1
Temporary disability	23,223	100.0	18,323	78.9	—	—	12,385	7.6
Hospitalization	31,267	100.0	14,281	46.7	14,681	45.7	12,585	9.1
Surgical	28,309	100.0	14,983	53.0	10,731	37.9	12,280	13.4
Medical	17,334	100.0	7,463	42.7	7,591	43.9	—	—
Major medical-expense	1,889	100.0	796	100.0	—	—	—	—
Retirement	12,500	100.0	8,915	31.3	—	—	8,585	68.7

¹ Life Insurance Association of America, *Group Insurance and Group Annuity Coverage, 1954*.

² Health Insurance Council, *Extent of Voluntary Health Insurance Coverage in the United States, 1954 survey*. Employees estimated to be 75 percent of the total number of subscribers.

³ Rough estimate based on data for various trade unions, employee-benefit associations, and company-administered plans; for hospitalization, surgical, and

medical benefits, mostly independent plans and unions.

⁴ Health Insurance Council, *Extent of Voluntary Insurance Coverage in the United States, 1953 survey*, p. 26.

⁵ Estimated by the Division of the Actuary, Social Security Administration.

⁶ Institute of Life Insurance, *Tally of Life Insurance Statistics, May 1955*.

plans provide surgeon's and physician's services. The plans pay the hospitals, surgeons, or physicians directly. Any residual costs not met by the plan are billed to the patient. Many of the Blue Shield and other medical-society-sponsored plans have agreements with "participating" physicians, under which the physicians accept from the plan stated amounts (on a "schedule of fees") as full payment for their services when the subscriber's annual income does not exceed certain limits—for example, \$2,400 for a single person and \$4,000 if he has a family.

The plans generally operate in the local community. The Blue Cross plans are affiliated with the Blue Cross Commission of the American Hospital Association, the Blue Shield plans with the Blue Shield Medical Care Plans. The two types are closely coordinated, and the Blue Cross plans commonly handle the enrollment and other business procedures for the Blue Shield plans.

Independent plans.—This category includes facilities providing various kinds of medical services. Some of the plans are sponsored by the consumers of medical care (for example, Group Health Association, in Washington, D. C., and the Group Health Cooperative of Puget Sound); some by physicians engaged in the group

practice of medicine (Ross-Loos Medical Group, of California, and the Kaiser Foundation Health Plan on the Pacific Coast); others by unaffiliated organizations serving whole communities, as do the Blue Cross or Blue Shield plans (Health Insurance Plan of Greater New York and the Inter-County Hospitalization Plan, of Pennsylvania); and still others by trade unions (Labor Health Institute, of St. Louis, Missouri, and the various International Ladies' Garment Workers' Union (ILGWU) health centers).

Claims handling by insurance carriers.—Insurance carriers are the mediums through which benefits are provided under insured plans. The sponsors of the plans pay the premiums or subscription dues to these carriers. They receive a master policy, and the employees are given certificates of insurance.

For cash benefits, the person presents his claim to the insurance organization either directly or through the employer's personnel office, the employee-benefit association, or the local union office. In multi-employer plans it may be placed through the administrative office of the trust fund. The insurance carrier, after proper verification of the claim, pays the benefit. When hospitalization, surgical, or other medical benefit is involved, the beneficiary may assign

⁴ See "Voluntary Health Insurance and Medical Care Costs, 1948-55," *Social Security Bulletin*, December 1956.

his claim to the hospital or physician, who is paid directly by the insurance carrier. When Blue Cross and Blue Shield plans or similar plans providing service benefits are used, the insuring organization issues an identification card to the employee, who presents it to the hospital or physician rendering the service.

Commercial insurance carriers often enter into arrangements with the policyholder—the employer, employee benefit association, trade union, or welfare fund administrator—who thereby assumes most or all of the administrative functions. The policyholder then maintains the records of the employees covered, reporting to the insurance company only the changes that occur in the group. He often handles all matters relating to claims, including the establishment of their validity, and may even be authorized by the carriers to draw drafts on them in payment of such claims.

Self-insurance.—As can be seen from table 4, many covered workers are in self-insured plans. The benefit plans of the American Telephone and Telegraph Company and of the United Mine Workers Welfare and Retirement Fund, for example, are self-insured. Another outstanding self-insured plan is that of the Consolidated Edison Company of New York City, whose employee-benefit association has made direct arrangements—similar to those used by the Blue Cross and Blue Shield organizations—for hospitalization and medical services with certain hospitals and physicians in New York City. The benefits available to the members of the ILGWU by collective bargaining with employers constitute another example of self-insurance.

In self-insured plans the sponsors, with the trustees, perform the functions of the insurance carriers. They may provide the benefits out of current income or out of funds accumulated through systematic payments in amounts designed to make the money available when necessary.

Retirement Benefits

Although most pension plans are underwritten by commercial carriers, most employees covered under pen-

Table 5.—*Method of financing private employee-benefit plans covering hourly workers, in 438 firms, by type of benefit, 1954*

Type of benefit	Percent of firms with cost paid by—			
	Employer only	Employer and employee	Employee only	Unknown
Life insurance and death benefits:				
Employees.....	41.8	54.8	2.3	1.1
Dependents.....	27.8	61.1	5.6	5.5
Accidental death and dismemberment.....	43.1	52.0	3.0	1.9
Temporary disability.....	39.4	53.1	6.2	1.3
Hospitalization:				
Employees.....	35.3	45.2	18.3	1.2
Dependents.....	15.2	44.2	37.7	2.9
Surgical:				
Employees.....	36.2	47.3	15.5	1.0
Dependents.....	16.0	45.4	36.9	1.7
In-hospital medical care:				
Employees.....	36.8	48.4	12.6	2.2
Dependents.....	16.7	50.0	30.0	3.3
Retirement.....	65.2	34.8	—	—

Source: National Industrial Conference Board, "Personnel Practices in Factory and Office" (5th edition), *Studies in Personnel Policy*, No. 145, 1954.

sion plans are in self-insured programs (table 4). In 1955 there were 18,980 insured pension plans covering an average of 219 employees per plan. Most of these plans (12,530) covered, on the average, only 38 employees.⁵ They were funded through individual policies because small groups do not lend themselves to self-insurance or to group annuity underwriting.

Under an insured pension plan the sponsor makes specified payments to an insurance company at stipulated times. The insurance company invests the money and guarantees that the reserves thus accumulated will be sufficient to provide the contemplated benefits.⁶ Moreover, it assumes the responsibility for paying out the benefits in accordance with the provisions of the plan.

Under most self-insured plans the

sponsors make periodic payments into a trust fund. The funds are generally held by banks and trust companies, whose functions are to hold, invest, and pay benefits in accordance with the terms of a trust agreement and the plan's provisions. These trustees assume no underwriting functions. It is the sponsor's responsibility to accumulate sufficient funds to meet the obligations of the plan. Usually, he employs a consulting actuary to design the plan, make a "valuation" of its cost, and calculate the amount of the periodic payments necessary to assure the adequacy of the fund accumulated. Once a plan is in operation, the actuary makes periodic valuations that take actual experience into account.

If the payments into the fund are sufficient to cover the cost of pensions "currently" earned by the employees, plus an amount to amortize the "past service" liability within a period of time, the plan is said to be fully funded. If they are insufficient, it is partially funded. In the few plans that are wholly unfunded—"pay as you go" plans—benefits are paid out of current income.

Method of Financing

Most employees covered by retirement plans are in noncontributory plans—that is, plans financed entirely by the employers. Plans providing other types of benefit tend to be contributory—financed jointly by employers and employees, often on a 50-50 basis. This type of financing is especially common in the plans in certain mass-production industries (the automobile and steel industries, for example) that provide both retirement and other benefits. In these industries, if retirement benefits are not provided, the other benefits are frequently noncontributory. There are, of course, variations. Employees often bear the greater part of the cost of dependent's benefits, sometimes the entire cost. In many plans the employees bear the full cost of health insurance coverage for themselves and their dependents (table 5). Contributory plans are found more frequently among those that cover salaried employees than among those covering hourly workers only.

⁵ *Life Insurance Fact Book*, 1955, page 33.

⁶ Under "deposit administration" plans this guarantee does not operate until the employee retires. The sponsor's payments are held on deposit in an undivided account, and when an employee retires the company withdraws an amount sufficient to purchase (at the then guaranteed rates) the retirement income to which he is entitled.

Table 6.—Estimated employer and employee contributions under private employee-benefit plans, by type of benefit, 1954

Type of benefit	Amount (millions)	Percent contributed by—	
		Employer	Employee
Total	\$6,846.2	66.3	33.7
Life insurance and death benefits	882.1	59.6	40.4
Accidental death and dismemberment	33.5	60.0	40.0
Temporary disability benefits and sick leave	684.6	67.9	32.1
Health insurance and services	1,953.0	33.9	66.1
Retirement	3,293.0	87.0	13.0

Source: S. Rept. 1734, p. 84.

In insured plans the underwriting practices of the insurance carriers and the regulations of the State insurance departments influence the proportion of the cost that is borne by the employer. Insurance companies believe that if the employer is not sufficiently interested to assume part of the cost the policy will ultimately prove unsatisfactory to them. Moreover, they do not look favorably upon contributory plans that cover a small number of employees, except in pension plans that combine life insurance with an annuity. For group term life insurance the maximum employee contribution in a standard group is 60 cents a month per \$1,000 of insurance. For other types of insurance, the companies expect the employers to bear at least 25 percent of the overall cost. In practice, the employee contributes a specified amount and the employer pays the balance of the cost. In 1954, employers bore two-thirds of the total cost of the benefits provided (table 6).

Types and Amounts of Benefits

Employee benefit programs result in a wide range of benefits. A recent study by the National Industrial Conference Board lists 14 different types of benefits. In addition to those shown in table 2, the list includes polio-expense insurance, supplementation of workmen's compensation, subsidized savings, and profit sharing and other types that are normally included among medical benefits and

retirement plans. Severance pay and supplementation of unemployment benefits should also be mentioned. A brief description of the more common types follows.

Life Insurance and Death Benefits

Life insurance is the most frequently provided benefit that is financed in whole or in part by employer contributions. Generally, it is in the form of group, 1-year renewable, term, life insurance. It has neither cash nor loan value, nor has it extended or paid-up value. Employees who terminate their employment therefore lose their insurance. The insurance remains in force, however, for 31 days, during which time the employee may convert it to any form of permanent life insurance at premium rates applying to his attained age and the plan of insurance selected. Usually the plan provides for a waiver of premium in the event of permanent and total disability occurring before age 60. For groups that are particularly good risks, a few insurance companies provide for the payment of the face value of the policy to the insured, either in a lump sum or in installments in the event of disability.

The minimum amount issued on an individual life is \$500. The maximum under most State laws is \$20,000, or it is 150 percent of the employee's annual compensation but not more than \$40,000. Some plans provide a flat amount to all employees, and some provide specified sums to certain classes of employees, but generally the amount is related to the employee's annual compensation. The current trend is to provide an amount equal to one or one and one-half times the employee's annual earnings. At the end of 1955, however, the average amount of group term life insurance was almost \$3,300 per covered employee. The coverage of the employee's dependents is a relatively new development. At the end of 1955 the average amount of group term life insurance per covered dependent was \$550.

When permanent protection is desired, group paid-up or group permanent life insurance may be used.

Both have a cash value in addition to paid-up value and are more expensive than term insurance. Group paid-up life insurance is issued in connection with term life insurance. At the outset a specified amount of insurance is issued for each employee. Each year a unit of paid-up insurance is purchased. The amount of term insurance is then reduced by the amount of paid-up insurance purchased so that the total amount of insurance remains the same. In contributory plans the employee's contribution is used to purchase the paid-up insurance, the employer's to purchase the term insurance. Group permanent life insurance is primarily a retirement program. The face value of the insurance is paid to the beneficiary if the employee dies before retirement. Should he live to retirement age, the cash value of the insurance is used to provide a retirement income.

Accidental Death and Dismemberment

Accidental death and dismemberment insurance, often referred to as "double indemnity" insurance, is generally issued with group life insurance. It provides benefits in the event of death or dismemberment due to bodily injury caused by external violent and accidental means.

The amount, expressed as a "principal sum," is usually the same as for the group life insurance but seldom exceeds \$10,000. The full amount is paid in the event of death, the loss of the sight of both eyes, or the loss of two members of the body. One-half the amount is paid for the loss of the sight of one eye or the loss of one member. The insurance now generally covers death or dismemberment resulting from both occupational and nonoccupational injuries.

Temporary Disability Provisions

Temporary disability insurance usually takes the form of paid sick leave or sickness and accident insurance.

Paid sick leave.—Formal paid sick-leave programs simply provide that, in the event of sickness, the employee's wages or salary will be con-

tinued, usually in full, for a specified period. Although many collective-bargaining agreements now include paid sick-leave clauses, they still affect relatively more office employees than hourly workers.⁷

In general, these programs require a minimum period of service—often 6 months or more—before the employee can qualify for paid sick leave. This period tends to be longer for hourly workers than for office employees. Benefits are usually payable without a waiting period and continue for 1, 2, or 3 weeks and sometimes longer, depending on the employee's length of service and whether he is an office employee or an hourly worker. Unused sick leave is sometimes accumulated. Unions have negotiated many contracts that require the employer to make cash payments to the worker representing the value of unused sick leave at the end of the year.⁸

Many firms have a sick-leave plan integrated with temporary disability insurance; the leave covers the periods before and after the insurance benefits are payable. In a few plans both benefits and leave are effective concurrently and in full for the specified duration. In others the joint benefits cannot exceed full pay. Paid sick leave is often integrated with workmen's compensation in the same manner.⁹

Sickness and accident insurance.—Sickness and accident insurance follows a definite pattern. Benefits are payable after a waiting period that may be as long as 14 days, although there is usually no waiting period in the case of an accident and one of more than 7 days is rarely found. Benefits are customarily payable for 13 or 26 weeks—seldom for more than 52 weeks. A combination frequently found provides for benefits beginning immediately in case of accident, after 7 days in case of illness,

⁷ Bureau of Labor Statistics, *Occupational Wage Survey, 1955-1956* (Bulletin No. 1181), 1956.

⁸ American Federation of Labor Research Report, Vol. 8, No. 10, December 1954, page 2.

⁹ "Paid Sick Leave and Group Insurance," *Management Record*, National Industrial Conference Board, February 1955, page 54.

and payable for as long as 26 weeks. The amount of benefit tends to approximate 50 percent of the employee's weekly wage but may be as high as 66½ percent and occasionally higher. The minimum weekly benefit is seldom less than \$10 and the maximum seldom greater than \$60. The average weekly benefit paid in 1955 was \$32.

The standard policies do not cover disabilities compensable under workmen's compensation laws. They require that a physician be in attendance. When maternity cases are covered, the benefit is generally limited to 6 weeks.

The laws of California, New Jersey, New York, and Rhode Island provide for compulsory nonoccupational disability benefits.¹⁰ In California and New Jersey, employers insure with the State fund unless the agency has approved a private plan (insured or self-insured). In New York, employers must arrange for benefit payments by purchasing a policy from an insurance company, from the State fund, or through self-insurance. Rhode Island employers must insure with the State fund, and benefits may be supplemented through private arrangements. The basic provisions of these laws are shown below.

Provision	California	New Jersey	New York	Rhode Island
Waiting period (number of days)	7	7	7	1 week
Benefit duration (number of weeks)	26	26	20	26
Weekly benefit amount	\$10-40	\$10-35	\$10-40	\$10-30
Contributions (percent):				
Employee ¹	1.0	0.5	0.5	1.0
Employer ²		0.25	(*)	

¹ Plus \$10 a day for hospitalization; maximum \$120.

² On first \$3,000 of annual wage except in Rhode Island, where it is \$3,600.

³ Subject to experience rating; average effective rate in 1954, 0.19 percent.

⁴ Remainder of cost.

In 1955, 47 percent of the employees covered in California, 62 percent

¹⁰ See Alfred M. Skolnik, "Temporary Disability Insurance Laws in the United States," *Social Security Bulletin*, October 1952; and Margaret Dahm, *Experience and Problems under Temporary Disability Insurance Laws*, Department of Labor, Bureau of Employment Security, October 1955.

of those in New Jersey, and 97 percent of those in New York were covered under private plans.¹¹ The average weekly benefit in 1955 under the private plans was \$36.00 in California and \$36.43 in New York.

Health Insurance

Hospital expense insurance.—The service benefit plans, such as Blue Cross, generally provide semiprivate accommodations. Cash benefit plans pay maximum daily benefits of \$5-\$15 toward the cost of room and board. Provisions for reimbursement of \$10 or more a day are frequent.¹²

Service benefit plans provide full benefits for 21-120 days and sometimes partial (usually half) benefits for an additional 20-120 days or more. Full service benefits for 30 days followed by 90 days of partial benefits are most frequently found, and 70 days of full benefits rank next. Cash benefit plans seldom provide more than 70 days of benefit.

In addition to room and board accommodations, the plans provide for ancillary benefits, such as the use of operating rooms and anesthesia, basal metabolism tests, oxygen, and drugs. The service benefit plans tend to provide the actual services. The cash benefit plans provide allowances toward these expenses in amounts usually related to the daily benefit allowances—5, 10, 15, or 20 times the allowance and sometimes more. Ten or 15 times the daily allowance is common. Maternity cases are usually covered, but room and board accommodations are generally limited to 10 days, 14 days, or a maximum dollar amount.

The current trend in hospital expense insurance is to extend this coverage to the employee's dependents. Sometimes the benefits provided them are less than those for the employees.

Surgical and other medical expense insurance.—This kind of insurance is available from the same types of organizations that offer hospital expense insurance.

¹¹ See *Annual Statistical Supplement, 1955 (Social Security Bulletin)*, page 13.

¹² State of New York, Department of Labor, *Health and Welfare Benefits in New York State*, December 1955, page 53.

The "service" characteristics of the Blue Shield plans are less distinct than those of the Blue Cross plans. First, nearly a third of the plans provide cash benefits only. Second, the service feature is nearly always limited to the surgical expense insurance, and other medical expense insurance takes the form of cash benefits. Third, even for surgical benefits, the service feature applies only to those employees whose income is less than a specified amount. For a single employee the income limits range from \$1,800 to \$5,000; the amounts most often specified are \$2,400 and \$3,000, with few plans having a limit above \$3,600. For family coverage, the range is from \$2,600 to \$6,000, with limits of \$3,600, \$4,000, and \$5,000 most frequent. Few plans specify a limit above \$5,000.

The surgical fees shown on the schedule fall in a wide range. The lowest fees are from \$1 to \$10, although \$5 is provided by most plans. The maximum allowed for any one procedure ranges from \$150 to \$450. In more than half the plans the maximum is \$200, \$225, or \$250; only 10 percent have fees of more than \$300.

Most Blue Shield plans provide for payment toward the physician's fees in nonsurgical cases, usually only when the patient is hospitalized. The amounts range from \$2 to \$5 per day (per visit in some plans); \$3 is common. Few plans pay an allowance for the first 2 or 3 days. The benefit is payable for as few as 13 days in some plans and as many as 180 in others but usually for the same number of days that the affiliated Blue Cross plan allows for hospital room and board; hence, 30 days is not infrequent. If more than one visit a day is allowed, a maximum limit (often \$150) for the period is usually specified. When provided, the allowance for physician's services at his office is sometimes smaller than for hospital visits; the allowance for home visits is usually larger.

The pattern of surgical and other medical insurance provided by commercial insurance carriers is similar to that in the Blue Shield plans. The basic differences, as already indicated, are that the former provide cash benefits only and pay the insured

person rather than the physician providing the service. The surgeon is not bound to accept any amount shown on the schedule of surgical fees as full payment of his charges, regardless of the employee's income.¹³ The schedules vary not only in the maximum amount payable but also in the amounts payable for a given procedure in different schedules with the same maximum benefit amount. A typical schedule with a maximum benefit of \$200 provides \$100 for an appendectomy, \$30 for a tonsillectomy, and \$200 for removal of a kidney. The amounts payable for these operations in schedules with higher or smaller maximums are usually in proportion. Schedules with fees of \$250 or \$300 are found with increasing frequency, with even higher schedules (up to \$500) being adopted in high medical cost areas—especially on the West Coast.

For other types of medical care, the insurance company policies usually pay benefits beginning with the physician's first visit at the hospital. For physician's services at his office or at the patient's home the policy may exclude the first, second, or third visit in sickness cases or in both accident and sickness cases. The benefit amount ranges from \$2 to \$9 but seldom exceeds \$3 for visits to the physician's office and \$5 for home or hospital visits. Maximum amounts of \$150 or \$250 are usually set.

*Major medical expense insurance.*¹⁴ This is the newest type of group health insurance. It is intended to help meet the cost of serious illnesses or accidents—that is, situations in which the basic insurance falls short of adequate protection. The employee's dependents may also be covered. The maximum amount payable may be \$2,500, \$5,000, \$7,500 (commonly), or \$10,000. A common form has a "corridor" that excludes the first \$100-\$500 of expenses in

excess of those covered by the basic plan. In addition, under the coinsurance feature the insurance company pays 75-80 percent of the expenses above the corridor and the employee pays the remainder. A comprehensive form includes both the basic and the major medical protection in the same package. There are many variations of these benefit provisions.

Group Insurance for Retired Employees

When an employee retires, if special arrangements have not been made in advance, he loses his group insurance unless he converts it to an individual policy at higher rates that he must pay entirely by himself. For health insurance, except in Blue Cross and Blue Shield plans, this arrangement is often not possible. A conversion privilege of any kind under a group hospital and surgical policy issued by a commercial insurance carrier is a recent development. Employers and trade unions have recognized this problem, and there is a distinct trend toward making advance arrangements for the continuance of insurance protection after retirement. A major difficulty, of course, is the somewhat higher cost of insuring older persons than younger ones.

Although statistics on the subject are still rather fragmentary, two recent studies throw some light on the continuation of insurance after retirement. A Bureau of Labor Statistics study¹⁵ was based on 300 employee-benefit plans (covering 5 million workers) under collective bargaining. It shows that half the plans (with 71 percent of the covered employees) that provide life insurance continued this benefit to retired employees, generally in reduced amounts. One-fifth of the plans (with 35 percent of the covered employees) providing health benefits had similar provisions, but the level of benefits was less often reduced (40 percent of the plans for hospitalization and one-third for

¹³ In Georgia, Maine, Rhode Island, Tennessee, and Wisconsin, however, the State medical societies have established schedules of fees applicable to certain income groups.

¹⁴ For a detailed description see Donald I. Cody, "Major Medical Coverage," *Best's Insurance News, Life Edition*, August 1956, page 69.

¹⁵ *Older Workers Under Collective Bargaining: Part II, Health and Insurance Plans, Pension Plans* (Bureau of Labor Statistics Bulletin No. 1199-2), October 1956, pages 3-13.

Table 7.—Illustrative monthly benefits payable to hourly workers under selected private retirement plans

[Benefit amounts reflect effect of eligibility requirements where applicable]

Plan ¹	Benefit at age 65 after 30 years of continuous service assuming level monthly wage of—					
	\$300, with benefit from—		\$350, with benefit from—		\$400, with benefit from—	
	Plan only	Plan and OASI ²	Plan only	Plan and OASI ²	Plan only	Plan and OASI ²
United States Steel Corporation ³	\$55.00	\$153.50	\$55.00	\$163.50	\$55.00	\$163.50
Ford Motor Company.....	67.50	166.00	67.50	176.00	67.50	176.50
Goodyear Tire and Rubber Company.....	54.00	152.50	54.00	162.50	65.75	174.25
United Mine Workers ⁴ Welfare and Retirement Fund.....	100.00	198.50	100.00	208.50	100.00	208.50
Amalgamated Clothing Workers ⁵	50.00	148.50	50.00	158.50	50.00	158.50
International Ladies' Garment Workers ⁶	65.00	163.50	65.00	173.50	65.00	173.50
Westinghouse Electric Company.....	67.50	166.00	67.50	176.00	67.50	176.00
Aluminum Company of America.....	55.00	153.50	55.00	163.50	65.00	173.50
du Pont (E.I.) de Nemours & Company.....	105.00	203.50	116.00	224.50	132.00	240.50
Consolidated Edison Company of New York.....	113.00	211.50	146.00	254.50	179.00	287.50
General Electric Company ⁷	72.00	170.50	84.00	192.50	114.00	222.50
Cities Service Company ⁸	82.50	181.50	96.25	204.75	110.00	218.50
Johnson and Johnson ⁹	75.60	174.10	94.50	203.00	121.50	230.00

¹ All plans are noncontributory unless otherwise noted.

² Old-age benefit only.

³ Beginning Nov. 1, 1957, minimum will be \$2.40 a month per year of service (up to 30) before Nov. 1, 1957, and to \$2.50 a month per year of service (up to 30) from that date, without old-age and survivors insurance offset.

⁴ Bituminous-coal industry. Normal retirement at age 60 with full plan benefits as shown.

⁵ Men's clothing industry.

⁶ Cloak and Suit Joint Board, New York City.

⁷ Contributory. Beginning Oct. 1, 1958, contributions on first \$4,200 of wages or salary will be waived.

⁸ Contributory.

surgical and other medical care).

Employers paid the full cost of life insurance for retired employees in two-thirds of the plans (with three-fourths of the covered employees) and shared the cost with active employees in 11 percent of the plans (with 16 percent of the covered employees). They shared the cost with retired employees in 11 percent of the plans, and the retired employee paid the full cost in the remainder. Fewer employers (two-fifths of the plans, covering two-fifths of the employees) paid the entire cost of health insurance for retired employees. Retired employees paid the full cost in about one-third of the plans (with half the employees) and shared the cost with employers in practically all the remaining plans. About 90 percent of the plans that continue health benefits for retired employees do so for their dependents as well, but the full cost is met by employers less often.

An earlier study, made by the National Industrial Conference Board,¹⁶ was based on the employee-benefit plans of 327 firms. Though the prac-

tice of continuing benefits after retirement was more common among these firms than among those studied by the Bureau of Labor Statistics, both studies showed that for life insurance, more often than for other types of insurance, (1) protection was continued after retirement, (2) benefits were reduced, and (3) the full cost was paid by the employer. The full cost of health insurance was more often paid by employers when the plans were underwritten by insurance companies, and by employees when protection was provided by Blue Cross or Blue Shield plans.

Retirement Benefits

A detailed analysis of the provisions of retirement plans is beyond the scope of this article.¹⁷ All that

¹⁷ Profit-sharing retirement plans are not included in this analysis. Though such plans have many of the features discussed here, they have others that are peculiar to them. The plans are financed, in whole or in part, from the employers' profits, with shares apportioned to the participants in a manner that takes their compensation and length of service (or participation) into account. Benefits at retirement are the result of the accumulations of the apportionments, the participating employee's contributions (if any), and the earnings thereon.

can be attempted here is a summary of the most important provisions that are found in such plans. For convenience, it is helpful to group them in two broad categories: pattern plans and conventional plans.¹⁸

The pattern plans are those that have been adopted by certain international trade unions and that have been negotiated, with minor exceptions, with individual employers or groups of employers. Except in the steel and rubber industries the benefit provided is a flat amount, which may vary with the employee's length of service but not with his rate of compensation. The plans are usually noncontributory and have other common characteristics.

Conventional plans include all other plans and generally provide benefits that vary with both the employee's length of service and his rate of compensation. Probably half these plans are contributory. The larger plans tend, however, to be noncontributory, and they include considerably more than half the employees covered in conventional plans. Practically all plans adopted by employers before 1950 were of the conventional type.

Coverage.—In the early 1940's some employers limited their formal pension plans to salaried employees only or to all employees earning more than \$3,000 annually. The trend now, however, is clearly in the direction of covering all employees. There may be a single plan for all employees, a pattern plan for employees in collective-bargaining units and a conventional plan for the others, or separate conventional plans for different groups of employees.

Requirements for participation.—To participate in a plan, employees may be required to have reached a certain age, served a stated period, or both. Few pattern plans have age requirements for participation. They

¹⁸ For a detailed analysis of 240 plans of both types see Bankers Trust Company of New York, *A Study of Industrial Retirement Plans*, 1956 edition. For an analysis of recent trends in group annuity plans, see Weltha Van Eenam and Martha E. Penman, *Analysis of 157 Group Annuity Plans Amended in 1950-54*, Social Security Administration, Division of the Actuary (Actuarial Study No. 44), July 1956.

¹⁶ "Insurance for Retired Employees," *Management Record* (National Industrial Conference Board), March 1955, pages 104-107.

specify instead a service requirement for benefits, usually 10 or 15 years and sometimes 20, but the trend is toward shortening the period required. Although many conventional plans have both age and service requirements for participation, the proportion without them is increasing. Service requirements are usual and range from less than 1 year to 5 years. Most of the plans have no age requirement, but, in those that do, age 25 or age 30 is a frequent stipulation; the trend is in the direction of liberalizing these requirements.

Retirement age.—The normal retirement age—that is, the earliest age at which an employee may retire with "full" benefits—is almost universally 65 for men. In pattern plans, 65 is nearly always the age for women also. In conventional plans—although in a declining number—the age for women is sometimes 60 or even 55. It appears that this practice is on the decline. A few plans have a normal retirement age as high as 70; some others provide for retirement at age 60.

The normal retirement age, however, is not always the age at which the employee must retire. In most plans, retirement may be deferred beyond normal retirement age, either at the employee's option or at that of his employer, sometimes indefinitely or to a specified age. The Bankers Trust Company found that 65 was the automatic retirement age, as well as the normal one, in 27 percent of the pattern plans and in 74 percent of the conventional plans it studied. Even when an automatic retirement age is specified, retirement may be postponed with the consent of the employer. No automatic retirement age was specified in one-third of the pattern plans studied and in only 6 percent of the conventional plans. In the other plans, retirement was automatic for men at ages ranging from 66 to 70. Although in most plans no increase in the benefit results from postponed retirement and the pension usually begins at actual retirement, provisions in recently revised and new plans indicate a tendency to increase benefits.

Retirement before attainment of normal retirement age is generally

permitted—less often in pattern plans than in conventional plans. Specific provisions for early retirement because of disability, however, are more common in the former than in the latter. Although the trend in pension planning is to include disability retirement provisions, they are seldom found in insured plans. Many plans do not pay disability benefits unless the employee has reached a specified age (for example, 50) and served a stated period—say 15 years—but the tendency is to impose a service requirement only. Early retirement (without disability) is somewhat more frequently contingent on the employer's consent than simply on the election of the employee. The attainment of a certain age, usually 60 in pattern plans and 55 in conventional plans, is almost always required. This stipulation is often accompanied by a service requirement of 5-30 years but most commonly 10-15 years. The benefit, of course, is reduced actuarially or on the basis of a formula that more or less compensates for the increased cost of early retirement.

Benefit formulas.—The amount of the retirement benefit is generally based on the employee's period of service, his rate of compensation, or both. The benefit formulas vary greatly. Some are expressed in terms of a flat amount (often \$2.25 monthly) for each year of service, based on the employee's entire service or a specified maximum number of years—say, 30. Others are expressed as a proportion of the compensation earned while in the plan or in the employer's service—for example, 1 percent of each year's compensation. Sometimes, and the use of this method seems to be growing, the percentage is applied to the average compensation in the last 5 or 10 years of the employee's service, and the result is multiplied by the number of years of creditable service. This percentage may be smaller for past service (service before the plan's inception) and may apply to the rate of compensation on a fixed date (before the inauguration of the employee-benefit plan).

Many plans apply a smaller percentage, often 1 percent, to the first

\$3,000, \$3,600, or \$4,200¹⁹ of annual compensation and a larger percentage, which may be 2 percent, to the remainder. In some of the plans that do not differentiate between earnings above and those below the wage amounts covered by the Federal old-age and survivors insurance program, the amount of the old-age benefit under that program (sometimes only half of it) is deducted from the plan's benefit. The trend, however, is toward the elimination of such deductions. A few plans provide for a flat benefit, such as \$125, that includes the old-age benefit after a specified period of credited service (25 or 30 years), reduced proportionately for less service.

There are many other types of benefit provisions. One airline company plan, for example, adjusts the benefit resulting from the formula to changes in the Bureau of Labor Statistics consumer price index after April 1, 1954. A recent development, called "split funding," results in a benefit based in part on a conventional benefit formula and in part on the results of the plan's investment policy, which permits the inclusion of common stock in its portfolio. For salaried employees many firms combine a pattern-plan formula with a conventional-plan formula.

In recent years there has been a trend toward minimum benefit provisions.²⁰ In pattern plans in the steel industry, for example, the minimum (after 30 years of service) is \$140 a month less \$85—an amount equal to the maximum old-age and survivors insurance benefit payable before the 1954 amendments.²¹ In the pattern plans in the rubber industry the minimum is \$54 (after 30 years' service)

¹⁹ These amounts correspond to the maximum taxable wage base under old-age and survivors insurance in the original Social Security Act and successive amendments.

²⁰ Dan M. McGill, *Fundamentals of Private Pensions*, Pension Research Council, 1955, page 41. See also Weitha Van Eenam and Martha E. Fenman, *op. cit.*, pages 2, 26.

²¹ On November 1, 1957, the minimum will be changed to \$2.40 a month per year of service before November 1, 1957, and to \$2.50 a month per year of service from that date. The benefit is subject to the 30-year maximum provision but not to the old-age and survivors insurance offset.

independent of the old-age and survivors insurance benefit. In plans where the minimum is subject to an offset for the old-age and survivors insurance benefit, the minimums range from \$100 to \$200 per month. In others the minimum may be as low as \$15 a month or as high as \$100. The flat benefit plans, of course, have "built-in" minimum provisions. Increasingly the minimums are being liberalized and made independent of old-age and survivors insurance benefits.

Ceilings on the amount of benefits may be imposed by limiting the amount of earnings or length of service on which benefits are based or by adopting a maximum benefit provision. In general the trend is toward eliminating or raising maximum benefits.

The formulas for disability retirement benefits are just as varied as those for age retirement benefits and like them are becoming more liberal. In a New York State study of pension funds held by State and national banks in the State, 15 distinct types are listed. A large number of plans provide a benefit that is the actuarial equivalent of accrued credits or of the normal retirement benefit. Many plans provide flat monthly benefits (ranging from \$20 to \$65); others pay stated amounts (\$1.50-\$3.00) for each year of service subject to minimums (\$22.50-\$50.00) and maximums (\$45.00-\$90.00). A few pay 25 percent of the final average salary. In the automobile industry, the monthly benefit is usually \$4.50 for each year of credited service, less the amount of the old-age and survivors insurance benefit. In money-purchase plans the balance in the employee's reserve account is often paid. The benefits are payable for the duration of the disability in some plans; in other plans until normal retirement age, when the full retirement benefit begins. Some are subject to deductions for other disability and/or old-age and survivors insurance benefits.

Amount of benefit.—Table 7 shows the results of the benefit formulas and eligibility provisions of 13 well-known pension plans as they apply to production workers with 30 years of

continuous service and level monthly wages of \$300, \$350, and \$400. In the first eight plans, the formulas give little or no weight to the different wage levels.

In the conventional plans analyzed by the Bankers Trust Company, the range in the median benefits (exclusive of old-age and survivors insurance benefits) was 26-30 percent of average compensation for employees averaging \$4,200 annually; 36-40 percent for those averaging \$7,200; and 41-45 percent for those averaging \$20,000. When the old-age and survivors insurance benefit is included, however, the medians ranged from 57 percent to 61 percent, 52 percent to 56 percent, and 47 percent to 51 percent, respectively.

Vesting.—When an employee terminates his employment before retirement (normal or early) without forfeiting the accrued pension resulting from his employer's contributions, he is said to have acquired a "vested" right. In multi-employer plans the question of vesting does not arise so long as an individual is employed by a participating employer. In contributory plans an employee is always entitled, on termination of employment, to a refund of his accumulated contributions—with interest in some plans. Payment of the benefit is deferred to normal retirement age or, in many plans, to optional earlier retirement age. Vesting provisions are now fairly common and are part of most conventional plans and many pattern plans. Insured plans practically always include them. Vesting is usually conditioned upon the completion of a stated period of service or participation (5-20 years), the attainment of a specified age (40-60), or both. Vesting is "full" in some plans, and in others, for employees who meet the minimum requirement, it may be "graded"—that is, "partial" but gradually becoming "full" when the employee meets all the requirements.

Death and termination benefits.—Benefits payable in the event of death before retirement are not usually an integral part of a retirement plan. Most employers providing employee benefits make separate provision through group life insur-

ance or some other form of death benefit. Noncontributory retirement plans seldom provide for death benefits. In contributory plans, the employee's accumulated contributions (with or without interest) are always paid to his beneficiary, and certain types of insured plans automatically provide death benefits.

Benefits in the event of death after retirement, provided under a retirement plan, generally depend on the type of annuity provided. Some types guarantee benefits for a specific period—say 10 years. If the annuitant dies within the 10 years the benefits are continued to his beneficiary until the guarantee has been fulfilled. Such annuities are more costly than those that terminate with the annuitant's death. In contributory plans the difference between the employee's contributions (with or without interest) and the benefits he received is paid to his survivor. Many plans give the employee the option of taking an annuity smaller than that resulting from the benefit formula, but one that would be continued (in whole or in part) to his survivor.

Cash termination benefits are seldom provided, except for the refund of employee contributions. A few plans, however, provide benefits that constitute a form of severance pay and that are based on the employee's length of service and his rate of compensation.

Employee contribution.—As already mentioned, few pattern plans require employee contributions. Even in conventional plans, the trend is away from this requirement. Moreover, in contributory plans, the trend is away from employee contributions on the first \$3,000, \$3,600, or \$4,200 of employee compensation. The Bankers Trust Company study, for example, shows that, though 55 percent of the conventional plans studied were contributory, more than 35 percent of the contributory plans did not require employee contributions on various portions (the first \$3,000-\$4,800) of earnings.

Employee contributions amounted to 1-4 percent on the first \$3,000, \$3,600, or \$4,200 of earnings and to 2-6 percent on the remainder. In most contributory plans, this rate is be-

tween two and three times the future service benefit rate. A plan that requires, for example, employee contributions of 2½ percent of the first \$4,200 of annual compensation plus 5 percent of the remainder might provide future service benefits of 1 percent of the first \$4,200 of each year's compensation plus 2 percent of the remainder.

Supplementary Unemployment Benefits

The plans negotiated in the automobile industry in May 1955 illustrate the approach to supplementation of State unemployment insurance by large employers in mass-production industries. The Ford and General Motors plans supplement the State benefits by an amount that will provide a combined benefit, for the first 4 weeks of unemployment, of 65 percent of straight pay after taxes and of 60 percent for as long as 22 weeks thereafter. The laid-off employee must have at least 1 year's seniority and must register with the State employment office. There is a 1-week waiting period. The weekly minimum benefit is \$2, and the maximum is \$25. During the first 2 years of the plan an employee earns 1 week of benefit for each 4 weeks worked. Thereafter the ratio becomes 1 to 2. The duration of benefits, actually, depends on the status of the trust fund created to finance the benefits. If it should fall below 85 percent of the "base" the number of weeks of benefits is reduced in accordance with a schedule taking both the position of the fund and the employee's seniority into account. If, for example, the fund position is 40-49 percent of the "base," an employee with less than 5 years' seniority would qualify for half the benefit weeks earned, but one with more than 25 years' seniority would qualify for all of them. If the fund falls below 13 percent of the base, the benefit amount is reduced 20 percent. The plan is financed by employer contributions, 5 cents for each hour worked.

The plans of the American Can Company and the Continental Can Company differ from those in the automobile industry in that benefits may be paid for as long as 52 weeks;

the combined State and plan benefit is 65 percent of after-tax straight-time pay, plus \$2 for each dependent up to four. The plans are employer-financed. The American Can Company pays 5 cents per hour worked; the Continental Can Company contributes 3 cents per hour worked, plus a contingent liability of 2 cents per hour worked if the fund becomes exhausted.

Other types of plans also add to the employment security of workers.²² A few set up what are, in effect, individual savings accounts that may be drawn upon in the case of layoff or illness. Some promise steady employment for specified periods; others restrict the employer's right to lay off workers; and still others provide severance pay.

Cost Factors

Obviously, the cost of an employee-benefit plan depends on the types and amounts of benefit included, as well as the conditions under which they are provided and the composition of the group covered. For this reason it is convenient to deal with the health and welfare plans and the retirement plans separately.

Health and Welfare Plans

Aside from the plan provisions, the important cost factors that are common to the benefits included under health and welfare plans are (1) the composition of the group covered, (2) its industrial risk classification, and (3) the size of the group. For all types of benefit except major medical expense and dependents' benefits, commercial insurance carriers consider certain industries—mining, for example—to be extrahazardous and thus require extra premiums. In plans paying temporary disability benefits, hospitalization, and other medical care benefits, the proportion of women is also important. In these types of insurance, a group in which women constitute 11 percent or more of the included employees is not a "standard" group, nor is a group em-

ployed in a hazardous industry. A standard group for life insurance consists of individuals who are not employed in a hazardous industry. The age distribution of the group, of course, greatly affects the cost of life insurance.

Table 8 gives illustrations of the gross premium rates charged by one large commercial carrier for a "standard" group for the more common types of group insurance. It shows a gross initial monthly cost of \$10.97 per employee for a fairly complete program. An additional monthly charge of 15 cents per \$1,000 is made on the first \$75,000 of group term life insurance. Insurance carriers commonly allow premium discounts (5-15 percent, depending on the total premium) on health insurance when large groups are involved. If the group consists of 1,000 employees, the program illustrated would require a gross monthly premium of \$10,050. If it is assumed that the employees work 2,000 hours a year, the initial cost per manhour would be 6 cents; if the average annual earnings per employee are \$3,000, the program would cost 4 percent of payroll, initially. (Allowances are made by the companies to pay for administrative functions undertaken by the sponsors of the plan).

Actually the cost of group insurance depends on the claims experience of the group. If the experience should prove to be unfavorable, the rates might be increased for subsequent years. If it should prove favorable, dividends or rate credits might be allowed. While such allowances vary from group to group, they are generally substantial. For 1954, the Senate Subcommittee on Welfare and Pension Funds stated, seven life insurance companies reported dividends and rate credits allowed on all types of group insurance, in cases involving 1,000 lives, that amounted to 12.9 percent of billed premiums for the first policy years and 16.5 percent for all policy years other than the first.

Blue Cross and Blue Shield plan rates vary from area to area, depending on the comprehensiveness of the plans, the cost of the services, and claims experience in the area.

²² See State of New York, Department of Labor, Division of Research and Statistics, *Guaranteed Annual Employment—New York State, 1955* (Publication No. B-89), June 1956.

Retirement Programs

The cost of pension plans depends on many factors. Rates of life expectancy and of investment earnings are basic. Life expectancy is continually increasing. Earnings on investments, as experienced by life insurance companies, declined from the early 1930's to 1952 but since then have tended to increase. The type and method of funding, benefit provisions, administrative expenses, and taxes are other cost factors.

According to the 1937 Standard Annuity Table, life expectancy for male annuitants is 21 years at age 55, 17.5 years at age 60, 14.4 years at age 65, and 11.6 years at age 70. For women it is longer. Assuming a rate of investment earnings of 3 percent, the amounts necessary at retirement to produce a straight life annuity paying \$100 a month for male employees retiring at the above ages are \$17,751, \$15,522, \$13,314, and \$11,185, respectively. Thus the lower the retirement age, the higher the cost. If these amounts are spread over the entire period of service, the annual outlay for male employees would be as follows:

Current age	Annual outlay, by specified retirement age			
	55	60	65	70
30.....	\$425	\$266	\$163	\$94
35.....	584	353	211	120
45.....	1,418	723	393	212

The cost thus increases with the age of the group. The cost also increases with the proportion of women in the group. The impact of rate of investment earnings on cost is illustrated by the fact that an amount invested at 2½ percent doubles itself in 35 years, but at 3 percent in only 24 years. In a typical plan a variation of ¼ of 1 percent in the rate of earnings could produce a difference of 6-7 percent in the long-range cost.

Employee contributions introduce other cost elements. Provision of disability benefits, vesting, and death and withdrawal benefits increase the cost. The actual mortality experience may raise it or reduce it. Labor turnover also influences the cost.

Table 8.—Illustrative monthly gross premiums under a typical health and welfare private employee-benefit program for a "standard" group, by type of benefit

Type of benefit	Provision	Premium rate	Monthly gross premium
Life insurance and death benefits—Accidental death and dismemberment.	\$3,000..... \$3,000 occupational and nonoccupational.	\$0.79 per \$1,000 ¹ \$0.10 per \$1,000.....	\$2.21 .30
Temporary disability.....	\$30 weekly; waiting period: 0 for accident, 7 days for sickness; duration, 26 weeks; maternity benefit.	\$0.76 per \$10.....	2.28
Hospitalization: Employee.....	Up to \$10 daily, 70 days, \$100 extra, maternity benefit.	\$1.53.....	1.53
Dependent.....	Same as for employee.....	\$3.92.....	*2.61
Surgical: Employee.....	Up to \$200, maternity benefit.....	\$0.53.....	.53
Dependent.....	Same as for employee.....	\$1.84.....	*1.23
In-hospital, physician's care: Employee.....	\$3 per visit, maximum \$93.....	\$0.095.....	.10
Dependent.....	Same as for employee.....	\$0.18.....	*.18

¹ Rates vary with age; assumes weighted average age of 45.

² Assumes two-thirds of employees will require dependents' coverage.

Legislative Interest

Along with the rapid growth of employee-benefit plans came many problems. Among the most important of these problems were the soundness of the administrative and financial structure of some of the plans and the impact on the economy of the large sums of money continuously contributed by employers and employees and of the amounts accumulated in the plans' reserves. These problems have recently attracted the attention of the executive and legislative branches of the States as well as of the Federal Government.

A few States have made extensive studies of the operation of such plans within their jurisdiction.²³ Legislation exercising a degree of control over the administration of some types of plans was passed by the State of Washington in 1955 and by New York in 1956.

President Eisenhower in his legislative recommendations on labor-management relations in January 1954 and again in his Economic Report the following year urged Congress to initiate studies of welfare and pension plans. In April 1956, after a 2-year investigation, the

Senate Subcommittee on Welfare and Pension Funds submitted its final report (Senate Report No. 1734) to the Senate Committee on Labor and Public Welfare. Its findings and recommendations may be summarized as follows:

1. The large number of persons covered by the plans, the plans' impact on the economy, and tax treatment of employer contributions and accumulated reserves²⁴ places upon the Government the responsibility for protecting the equities of the beneficiaries and the public interest by ensuring the plans' sound operations.

2. The plans fill a great need and much good flows from them. The vast majority are well and honestly administered. That fact is, however, "no excuse for the abuses, irregularities, and other deficiencies which have been found to exist. The fact that dishonesty and looting exist at all, points up the opportunity for abuse under the existing absence of controls."

3. Corporate trustees have only limited responsibilities. Group insurance is extremely complex, and serious impairment of the beneficiaries'

²³ See, for example, State of New York Insurance Department, *Private Employee Benefit Plans—A Public Trust*, 1956, and State of New York Banking Department, *Pension and Other Employee Welfare Plans*, 1956.

²⁴ Employer contributions are deductible from taxable income as a cost of doing business. Income of trust funds that qualify under Internal Revenue Service regulations is tax exempt.

equities can result when the purchaser is unfamiliar with the practices of the industry or, as found in a few instances, he uses the services of an unscrupulous broker.

4. The group insurance business, although interstate in character and national in scope, is regulated by the States.

5. A Federal disclosure act is necessary to "bring a great measure of order to the operation of private employee welfare and pension plans." The States cannot act uniformly and speedily. The problems cannot be met on a piecemeal basis without "stimulus from the Federal level." Such an act would leave much room to the States to fix the responsibilities of the trustees and to strengthen their insurance regulations.

6. The Federal disclosure law out-

lined by the subcommittee would be effective for 3 years and would require registration of all types of plans covering at least 25 employees and detailed certified annual reports, with financial and administrative data, from all plans covering at least 100 employees. The reports would be available for inspection at specified places, and summaries would be mailed by the plans to the covered employees. The act would be administered by the Department of Health, Education, and Welfare, the Department of Labor, the Internal Revenue Service, the Securities and Exchange Commission, or a new agency. The administering agency would conduct studies and investigations and make any reports it deems necessary and at the end of 2 years would report to Congress on the desirability of

continuing, simplifying, or modifying the legislation. An advisory council would be appointed, representing employees, management, and the insurance and banking industries. The Secretary of Health, Education, and Welfare, the Secretary of Labor, and the Commissioner of the Internal Revenue Service would be ex officio members of the council.

Several bills relating to disclosure of information were introduced in the Eighty-fourth Congress, but none was acted upon. The magnitude of private employee-benefit plans and their increasing importance in the economy, particularly in relation to the overall social security protection of the American people, make it probable that the subject will receive further attention both at the national and State levels.

Recent Publications*

Social Security Administration

BUREAU OF FEDERAL CREDIT UNIONS. *Federal Credit Union Handbook*. Washington: U. S. Govt. Print. Off., 1956. 58 pp. 35 cents.

Presents an overall picture of credit union operations.

BUREAU OF FEDERAL CREDIT UNIONS. *1955 Report of Operations, Federal Credit Unions*. Washington: U. S. Govt. Print. Off., 1956. 24 pp. 25 cents.

BUREAU OF PUBLIC ASSISTANCE. *Characteristics of State Public Assistance Plans Under the Social Security Act*. (Public Assistance Report No. 27.) Washington: U. S. Govt. Print. Off., 1956. No paging. 65 cents.

CHILDREN'S BUREAU. *Four Decades of Action for Children: A Short History of the Children's Bureau*, by Dorothy E. Bradbury. (Children's Bureau Publication No. 358.) Washington: U. S. Govt. Print. Off., 1956. 90 pp. 35 cents.

* Prepared in the Library, Department of Health, Education, and Welfare. Orders for items listed should be directed to publishers and booksellers; Federal publications for which prices are listed should be ordered from the Superintendent of Documents, U. S. Government Printing Office, Washington 25, D. C.

Includes a short statement—To the Future, by Martha M. Eliot.

General

"Better Service for Handicapped Job Seekers." *Employment Security Review*, Washington, Vol. 23, Sept. 1956, pp. 3-36. 20 cents.

Articles on counseling and selective placement, teamwork for community action, and "tailoring" the job to fit the man.

COHEN, WILBUR J., and FAURI, FEDELE F. "The Social Security Act Amendments of 1956." *Public Welfare*, Chicago, Vol. 14, Oct. 1956, pp. 183-199. \$1.

HERRERA BORNIA, ORESTES. *Seguridad Social en la República Dominicana*. Ciudad Trujillo: Impresora Arte y Cine, 1955. 508 pp.

Summaries, with text of laws, covering welfare activities in the Dominican Republic. Presents information on health and pension insurance, workmen's compensation, maternity protection, institutional care, and assistance programs.

HUTCHINSON, E. P. *Immigrants and Their Children, 1850-1950*. (Census Monograph Series.) New York: John Wiley & Sons, 1956. 391 pp. \$6.50.

"A survey and a guide to census data on immigrants and their chil-

dren in the population and labor force."

LINDSEY, FRED D. "The Cost of Fringe Benefits—1955." *American Economic Security*, Washington, Vol. 13, Sept.-Oct. 1956, pp. 22-28. 25 cents.

MUSHKIN, SELMA, and BOOTH, PHILIP. "Financing of Unemployment, Cash Sickness and Workmen's Compensation Insurance." *National Tax Journal*, Sacramento, Vol. 9, Sept. 1956, pp. 203-231. \$1.50.

NATIONAL SCIENCE FOUNDATION. *Organization of the Federal Government for Scientific Activities*. Washington: U. S. Govt. Print. Off., 1956. 349 pp. \$1.75.

SPAIN. *Legislación de Seguridad Social (Vigente en 31 de Diciembre de 1954)*. Tomo III. (Pub. No. 867.) Madrid: Instituto Nacional de Previsión. No date. 2325 pp.

Laws and decrees dealing with health and welfare provisions.

U. S. LAWS. *Railroad Retirement and Unemployment Insurance Act, as Amended*. Compiled by Elmer A. Lewis. Washington: U. S. Govt. Print. Off., 1956. 144 pp. 45 cents.

Retirement and Old Age

"Compulsory Pension Scheme for Independent Workers in Belgium." *Industry and Labour*, Geneva, Vol. 16, Oct. 1, 1956, pp. 307-311. 25 cents.

(Continued on page 24)

Regularly Scheduled Notes and Tables, 1957

LISTED BELOW are the titles of the scheduled tables and analytical notes with accompanying tables and the issues of the BULLETIN in which they will appear; there may, however, be changes in or additions to the list. Tables with calendar-year data for all programs will appear in the Annual Statistical Supplement.

General Social Security Data

Contributions and taxes under selected social insurance and related programs, by specified period (calendar or fiscal-year totals, current reporting month, and 12 preceding months)	monthly
Federal cash income and outgo and amounts for programs under the Social Security Act	October
Federal grants to State and local governments (note)	June
Federal grants to States under the Social Security Act: Checks issued, by State (fiscal-year data)	October
Money income sources of aged (note)	June, December
Money income sources of orphans and young widows (note)	August
Payrolls in employment covered by selected programs in relation to civilian wages and salaries, by specified period 1938- (calendar-year totals and quarterly data)	March, June, September, December
Selected current statistics (pages 1 and 2)	monthly
Selected social insurance and related programs, by specified period, 1940- (calendar-year totals, current reporting month, and 12 preceding months)	monthly
Social welfare expenditures in the United States (article, fiscal-year data)	October
Status of the old-age and survivors insurance trust fund, by specified period, 1937- (calendar or fiscal-year totals, current reporting month, and 12 preceding months)	monthly
Status of the unemployment trust fund, by specified period, 1936- (calendar or fiscal-year totals, current reporting quarter, and 4 preceding quarters)	March, June, September, December
Trust fund operations (note)	April
Workmen's compensation payments (note)	December

Old-Age and Survivors Insurance

Amount of monthly benefits and lump-sum death payments paid, by State (calendar year and fiscal year)	July, October
Benefits awarded to women aged 62-64, November and December 1956 (note)	August
Family benefits (note)	September, December
Monthly benefits in current-payment status at the end of the month, by type of benefit (current reporting month and 12 preceding months)	monthly
Number and amount of monthly benefits in current-payment status, by type of benefit and by State (end of calendar year and of fiscal year)	July, October
Number of aged beneficiaries receiving monthly benefits per 1,000 population aged 65 or over, by State (end of calendar year and of fiscal year)	July, October
Number of employers and workers and estimated amount of wages in covered employment, by specified period, 1940- (note, calendar-year totals and quarterly data)	February, May, August, November

Number of monthly benefits awarded, by type of benefit, and number of lump-sum payments, 1940- (calendar-year totals and quarterly data)

March, June, September, December

Number of monthly benefit awards for selected types of benefit, 1950- (calendar-year totals and quarterly data)

June, December

Number of monthly benefits withheld

May, October

Old-age benefits awarded (note, annual data)

July

Old-age benefits awarded, January-June (note)

March

Old-age benefits in current-payment status on December 31, by sex of beneficiary and by State (note)

February

Old-age benefits in current-payment status on December 31, by size of benefit and by State (note)

June

Social security employment taxes by internal revenue collection district

March

Workers with insured status (note)

May

Public Assistance

Aid to the blind: Recipients and payments to recipients, by State

monthly

Aid to dependent children: Recipients and payments to recipients, by State

monthly

Aid to the permanently and totally disabled: Recipients and payments to recipients, by State

monthly

Amount of vendor payments for medical care for public assistance recipients, by program and State

monthly

Assistance expenditures per inhabitant (note)

March

Average payments including vendor payments for medical care, average amount of money payments, and average amount of vendor payment per case, by program and State

monthly

Concurrent receipt of old-age and survivors insurance benefits and public assistance (article)

September

General assistance: Cases and payments to cases, by State

monthly

Old-age assistance: Recipients and payments to recipients, by State

monthly

Public assistance in the United States, by month (number of recipients and amount of assistance, by program, current reporting month and 12 preceding months)

monthly

Recipient rates for specified types of public assistance in the United States, by State

March, September

Source of funds expended for public assistance payments, fiscal year

February

State and local assistance expenditures in relation to income payments (note)

May

Federal Credit Unions

Credit unions in the United States (note)

November

Employment Security

Selected data on nonfarm placements and unemployment insurance claims and benefits

monthly

Current Operating Statistics

Table 1.—Selected social insurance and related programs, by specified period, 1940–56
[In thousands; data corrected to Dec. 7, 1956]

Year and month	Total	Retirement, disability, and survivor programs										Unemployment insurance programs							
		Monthly retirement and disability benefits ¹				Survivor benefits						Temporary disability benefits under Railroad Unemployment Insurance Act ⁹	State laws ¹⁰	Veterans' legislation ¹¹	Railroad Unemployment Insurance Act ⁸				
		Social Security Act		Railroad Retirement Act	Civil Service Commission ²	Veterans Administration ³	Monthly			Lump-sum ⁷									
		Social Security Act ⁴	Railroad Retirement Act ⁵	Civil Service Commission ²	Veterans Administration ³	Social Security Act ⁴	Railroad Retirement Act ⁵	Civil Service Commission ²	Veterans Administration ³	Social Security Act	Other ⁶								
Number of beneficiaries																			
1955																			
October	5,703.9	422.0	231.3	2,695.2	2,151.6	202.1	73.1	(18)	48.3	12.2	33.8	672.4	42.2	27.3					
November	5,747.6	424.5	231.8	2,700.8	2,154.3	204.6	73.5	(18)	46.1	12.4	37.5	685.3	39.6	33.6					
December	5,788.1	426.7	233.9	2,706.6	2,172.5	206.4	74.3	1,155.6	46.7	12.2	35.7	800.8	50.9	48.0					
1956																			
January	5,817.6	426.8	237.2	2,711.8	2,186.3	207.1	75.3	(18)	46.6	11.9	38.4	1,200.0	66.0	58.1					
February	5,872.2	428.9	239.3	2,704.4	2,197.6	208.0	76.0	(18)	41.8	12.2	29.3	1,309.2	73.5	59.7					
March	5,939.0	431.8	240.5	2,715.9	2,210.7	208.4	77.0	1,165.5	46.8	12.3	27.0	1,312.6	72.2	56.8					
April	6,007.9	434.2	241.4	2,724.9	2,227.7	208.5	77.7	(18)	52.2	12.3	25.3	1,219.5	59.2	44.1					
May	6,070.7	436.9	243.1	2,732.8	2,244.6	209.6	78.4	(18)	53.7	12.7	24.9	1,064.4	44.4	30.9					
June	6,114.4	437.2	244.6	2,738.5	2,260.1	211.0	80.7	1,175.8	49.3	12.2	22.4	1,072.1	45.6	23.0					
July	6,177.2	437.3	244.6	2,743.9	2,274.0	212.1	80.9	(18)	48.3	12.0	24.4	975.6	47.9	38.4					
August	6,275.8	439.1	248.8	2,749.6	2,290.7	212.8	81.5	(18)	50.6	12.3	34.6	931.8	52.1	78.0					
September	6,345.5	440.9	249.4	2,752.8	2,302.3	213.8	82.1	(18)	43.3	11.4	33.0	888.9	47.7	43.6					
October	6,387.9	441.2	249.3	2,758.7	2,313.6	214.8	82.9	(18)	38.7	12.6	36.5	752.3	30.3	39.9					
Amount of benefits ¹³																			
1940	\$1,183,462	\$17,150	\$114,166	\$62,019	\$317,851	\$6,371	\$1,448	-----	\$105,696	\$11,833	\$12,267	-----	\$518,700	-----	\$15,961				
1941	1,079,648	51,169	119,912	64,933	320,561	23,644	1,559	-----	111,799	13,270	13,943	-----	344,321	-----	14,537				
1942	1,124,351	76,147	122,806	68,115	325,265	39,523	1,603	-----	111,193	15,005	14,342	-----	344,084	-----	6,268				
1943	91,696	92,943	125,795	72,961	331,350	55,152	1,704	-----	116,133	17,843	17,255	-----	79,643	-----	917				
1944	1,104,638	113,487	129,707	77,193	456,279	73,451	1,765	-----	144,302	22,034	19,238	-----	62,385	\$4,215	582				
1945	2,047,025	148,107	137,140	83,874	697,830	99,651	1,772	-----	254,238	26,127	23,431	-----	445,866	126,630	2,359				
1946	5,135,413	222,320	149,188	94,585	1,268,984	127,933	1,817	-----	333,640	27,851	30,610	-----	1,094,850	1,743,718	39,917				
1947	4,658,540	287,554	177,055	106,876	1,676,029	149,179	19,283	-----	382,515	29,460	33,115	-----	\$11,368	776,165	39,401				
1948	4,454,705	352,022	208,642	132,852	1,711,182	171,837	36,011	\$918	413,912	32,315	32,140	30,843	793,265	510,167	28,599				
1949	5,613,168	437,420	240,893	158,973	1,692,215	196,586	39,257	4,317	477,406	33,158	31,771	30,103	1,737,279	430,194	103,596				
1950	5,196,761	651,409	254,240	175,787	1,732,208	276,945	43,884	8,409	491,579	32,740	33,578	28,099	1,373,426	34,653	56,804				
1951	5,503,855	1,321,061	268,733	196,529	1,647,938	506,803	49,527	14,014	519,398	57,337	33,356	26,297	840,411	2,234	20,217				
1952	6,285,237	1,589,327	361,200	225,120	1,722,255	591,504	74,085	19,986	572,983	63,298	37,251	34,689	998,237	3,539	41,793				
1953	7,353,396	2,175,311	374,112	269,300	1,840,437	743,536	83,319	27,325	613,475	47,451	43,377	45,150	962,221	41,606	46,684				
1954	9,455,374	2,697,982	428,900	298,126	1,921,380	879,952	93,201	32,530	628,801	92,229	41,480	49,173	2,026,866	107,666	157,088				
1955	10,275,552	3,747,742	438,970	335,876	2,057,515	1,107,541	121,847	39,362	688,426	112,871	42,233	51,945	1,350,268	87,672	93,284				
1955																			
October	811,776	312,861	36,729	30,832	173,660	91,099	10,000	3,703	57,310	9,719	3,398	4,803	70,091	4,243	3,328				
November	820,709	316,057	36,953	31,135	173,019	91,805	10,146	3,759	57,099	9,304	3,525	5,184	74,674	4,132	3,917				
December	849,375	318,812	37,151	31,458	173,814	92,801	10,251	3,785	57,361	9,387	3,402	4,979	95,153	5,230	5,791				
1956																			
January	897,436	321,075	37,191	32,594	173,648	93,595	10,306	3,858	57,762	9,375	3,548	4,871	135,725	6,726	7,162				
February	907,673	325,167	37,423	32,593	172,628	94,263	10,367	3,928	57,510	8,439	3,540	3,729	143,923	7,051	7,112				
March	924,543	329,941	37,737	32,546	173,801	95,035	10,407	3,960	57,802	9,411	3,688	3,691	151,998	7,274	7,242				
April	912,679	334,608	37,980	32,685	175,973	96,007	10,437	4,029	58,560	10,484	3,758	3,308	133,926	5,723	5,141				
May	909,100	338,759	38,232	32,836	176,656	96,984	10,518	4,094	58,870	10,609	4,054	3,404	125,786	4,694	3,604				
June	897,302	341,549	38,287	33,108	174,292	97,875	10,608	4,123	58,082	9,798	3,515	3,002	116,040	4,452	2,571				
July	901,858	345,879	38,319	33,786	175,082	98,741	10,683	4,157	58,173	9,583	3,494	3,138	111,708	4,970	4,145				
August	921,519	352,619	38,531	33,747	176,638	99,727	10,741	4,202	58,690	10,081	3,646	4,859	112,207	5,630	10,201				
September	902,032	357,049	41,971	33,536	174,513	100,445	11,143	4,242	57,984	8,618	2,920	4,632	94,919	4,499	5,561				
October	903,854	359,795	42,064	33,343	176,603	101,147	11,116	4,318	58,678	7,714	3,813	5,333	91,475	3,258	5,197				

¹ Under the Social Security Act, retirement benefits—old-age, wife's, and husband's benefits, and benefits to children of old-age beneficiaries—partly estimated. Under the other 3 systems, benefits for age and disability; beginning December 1951, spouse's annuities under the Railroad Retirement Act. September 1956 data for amount of benefits under the railroad program estimated.

² Data for civil-service retirement and disability fund; excludes noncontributory payments made under the Panama Canal Construction Annuity Act. Through June 1948, retirement and disability benefits include payments to survivors under joint and survivor elections.

³ Pensions and compensation, and subsistence payments to disabled veterans undergoing training; beginning July 1955, payments on estimated basis and adjusted quarterly.

⁴ Mother's, widow's, widower's, parent's, and child's benefits; partly estimated.

⁵ Annuities to widows under joint and survivor elections and, beginning February 1947, survivor benefits—widow's, widower's (first paid December 1951), widow's current, parent's, and child's benefits. September 1956 data for amount of benefits estimated.

⁶ Payments to widows, parents, and children of deceased veterans; beginning 1955, data for beneficiaries shown as of end of quarter; beginning July 1955, payments on estimated basis and adjusted quarterly.

⁷ Number of decedents on whose account lump-sum payments were made.

⁸ Payments under the Railroad Retirement Act. Federal civil-service and veterans' programs; beginning July 1955, data for veterans' programs on estimated basis.

imated basis.

⁹ Represents average number of beneficiaries in a 14-day registration period; temporary disability benefits first payable July 1947.

¹⁰ Represents average weekly number of beneficiaries; beginning January 1955 includes data for payments to unemployed Federal workers made by the States as agents of the Federal Government.

¹¹ Beginning September 1944, under the Servicemen's Readjustment Act, readjustment allowances to unemployed and self-employed veterans of World War II. Beginning November 1952, under the Veterans' Readjustment Assistance Act, unemployment compensation benefits to veterans with military service since June 1950. Number represents average weekly claims paid.

¹² Not available.

¹³ Payments: under the Social Security Act annual data represent Treasury disbursements and under the Railroad Retirement Act, amounts certified (for both programs monthly data for monthly benefits represent benefits in current-payment status); under the Railroad Unemployment Insurance Act, amounts certified; for Veterans Administration programs, except the readjustment allowance program, disbursements; under the State unemployment insurance laws, the Servicemen's Readjustment Act, and the Veterans' Readjustment Assistance Act, checks issued; for civil-service programs, disbursements through June 1949 and authorizations beginning July 1949. Adjusted on annual basis except for civil-service data and payments under the Railroad Unemployment Insurance Act, which are adjusted monthly.

Source: Based on reports of administrative agencies.

Table 2.—Contributions and taxes collected under selected social insurance and related programs, by specified period, 1954-56

[In thousands]

Period	Retirement, disability, and survivor insurance			Unemployment insurance		
	Federal insurance contributions ¹	Federal civil-service contributions ²	Taxes on carriers and their employees	State unemployment insurance contributions ³	Federal unemployment taxes ⁴	Railroad unemployment insurance contributions ⁵
Fiscal year:						
1954-55 ⁶	\$5,087,154	\$469,856	\$600,106	\$1,142,009	\$279,986	\$23,720
1955-56 ⁶	6,442,370	808,207	634,323	1,328,722	324,656	34,043
4 months ended:						
October 1954	1,396,550	162,278	163,804	406,951	24,212	5,890
October 1955	1,881,493	421,549	178,260	453,467	22,772	6,277
October 1956 ⁷	(*)	723,155	183,192	563,998	3,680	19,668
1955						
October	221,517	47,817	18,031	87,766	3,855	204
November	704,700	48,721	84,769	184,576	14,014	2,038
December	340,055	47,326	54,691	12,346	1,156	4,142
1956						
January	186,056	52,318	17,300	71,035	31,850	102
February	661,916	31,404	85,058	130,219	241,146	1,872
March	520,119	59,257	53,870	9,312	5,880	4,126
April	598,353	49,098	15,267	138,956	4,045	596
May	997,587	53,424	91,356	316,671	2,499	12,193
June	552,091	45,109	53,751	12,140	1,294	2,698
July ⁷	351,031	9,560,769	23,376	148,138	1,719	434
August ⁷	818,805	60,862	81,404	295,588	742	9,833
September ⁷	412,743	49,785	53,453	10,879	621	8,783
October	(*)	51,738	24,959	109,393	598	617

¹ Represents contributions of employees and employers in employment covered by old-age and survivors insurance (beginning December 1952, adjusted for employee-tax refunds); from May 1951, includes deposits in the trust fund by States under voluntary coverage agreements; beginning January 1951, on an estimated basis.

² Represents employee and Government contributions to the civil-service retirement and disability fund; Government contributions are made in 1 month for the entire fiscal year.

³ Represents deposits in State clearing accounts of contributions plus penalties and interest collected from employers and, in 3 jurisdictions, contributions from employees; excludes contributions collected for deposit in State sickness insurance funds. Data reported by State agencies.

⁴ Represents taxes paid by employers under the Federal Unemployment Tax Act.

⁵ Beginning 1947, also covers temporary disability insurance.

⁶ Except for State unemployment insurance contributions, as shown in the Final Statement of Receipts and Expenditures of the U. S. Government.

⁷ Preliminary.

⁸ Not available.

⁹ Includes contributions from the Federal Government.

Source: *Monthly Statement of the U. S. Treasury*, and other Treasury reports, unless otherwise noted.

RECENT PUBLICATIONS (Continued from page 21)

"National Old-Age Insurance Scheme in the Netherlands." *Industry and Labour*, Geneva, Vol. 16, Oct. 15, 1956, pp. 346-349. 25 cents.

"Social Security: Increase in Pensions in France." *Industry and Labour*, Geneva, Vol. 16, Oct. 1, 1956, pp. 305-307. 25 cents.

U. S. DEPARTMENT OF LABOR. BUREAU OF EMPLOYMENT SECURITY. *Counseling and Placement Services for Older Workers*. (BES No. E152.) Washington: U. S. Govt. Print. Off., 1956. 88 pp. 50 cents.

U. S. DEPARTMENT OF LABOR. BUREAU OF EMPLOYMENT SECURITY. *Pension Costs in Relation to the Hiring of Older Workers*. (BES No. E150.) Washington: U. S. Govt. Print. Off., 1956. 26 pp. 25 cents.

Concludes that pension costs ought not to be considered an obstacle to the employment of older workers.

U. S. DEPARTMENT OF LABOR. BUREAU OF LABOR STATISTICS. *Job Performance and Age: A Study in Meas-*

urement

(Bulletin No. 1203.)

Washington: U. S. Govt. Print. Off., 1956. 72 pp. 45 cents.

A research study of the output per manhour, attendance, and separation rates of production workers in different age groups.

Public Welfare

BREMNER, ROBERT H. *From the Depths: The Discovery of Poverty in the United States*. New York: New York University Press, 1956. 364 pp. \$5.50.

Traces the awareness of the problem of poverty from the early days of industrialization to the application of scientific philanthropy by social workers. The study covers the period 1830-1925.

BRIGHTMAN, I. JAY. "Physicians and the Public Welfare Recipient." *New York State Journal of Medicine*, New York, Vol. 56, July 1, 1956, pp. 2127-2134. 50 cents.

Concerns that approach to medical care for the needy in which assistance recipients are cared for through the

regular medical resources of the community and in which payments for physicians' services are made by the public welfare agencies on a fee-for-service basis.

EMERY, MARIAN. "The Family Agency's Part in International Social Work." *Social Casework*, New York, Vol. 37, Nov. 1956, pp. 437-442. 50 cents.

JOHNSON, KENNETH D. "The Role of Social Work Education in Preparing Personnel for the Corrections Field." *Federal Probation*, Washington, Vol. 20, Sept. 1956, pp. 54-58. Free.

"Legislative Developments in the States." *Public Welfare*, Chicago, Vol. 14, Oct. 1956, pp. 212-213. \$1.

LIEPELES, JULIETTE C. "Teaching Social Work in a Medical Setting." *Social Casework*, New York, Vol. 37, Nov. 1956, pp. 450-456. 50 cents.

PAGE, HARRY O. "Progress Toward Control and Prevention of Depend-

(Continued on page 28)

Table 3.—Status of the old-age and survivors insurance trust fund, by specified period, 1937-56
 [In thousands]

Period	Receipts		Expenditures		Assets		
	Net contribution income and transfers ¹	Interest received ²	Benefit payments	Administrative expenses ³	Net total of U. S. Government securities acquired ⁴	Cash balance at end of period	Total assets at end of period
Cumulative, January 1937-September 1956 ⁵	\$43,660,544	\$3,491,536	\$23,909,046	\$981,550	\$22,075,213	\$636,227	\$22,711,441
Fiscal year:							
1954-55 ⁶	5,087,154	447,580	4,333,147	103,202	1,240,627	560,511	21,141,001
1955-56 ⁶	6,442,370	494,889	5,360,813	124,339	1,462,540	550,034	22,593,109
3 months ended:							
September 1954	1,207,380	20,497	903,952	21,589	302,918	702,169	20,344,950
September 1955	1,659,976	24,098	1,280,342	31,348	434,548	498,347	21,513,386
September 1956 ⁶	1,582,579	23,738	1,456,235	31,706	32,182	636,227	22,711,441
1955							
September	519,117	15,330	428,522	9,976	-269,558	498,347	21,513,386
October	221,517	18,127	434,163	9,770	-228,059	522,116	21,309,097
November	704,700	4,219	436,644	12,542	179,000	602,849	21,568,830
December	340,055	201,141	437,443	9,479	135,884	561,238	21,663,104
1956							
January	186,056	71,041	438,481	9,727	-247,406	547,533	21,401,992
February	661,916	3,303	444,634	9,999	70,352	687,767	21,612,579
March	520,119	13,737	457,667	10,227	175,942	577,786	21,678,541
April	598,353	18,427	471,736	9,568	-179,159	892,421	21,814,016
May	997,587	4,600	478,994	12,440	647,668	755,506	22,324,769
June ⁶	552,091	206,196	480,708	9,239	473,767	550,034	22,593,109
July ⁶	351,031	1,081	479,651	11,300	-221,601	632,795	22,454,225
August ⁶	818,805	3,135	486,813	9,923	380,931	577,068	22,779,429
September ⁶	412,743	19,522	489,770	10,483	-127,148	636,227	22,711,441

¹ For July 1940 to December 1950 equals taxes collected; beginning January 1951, equals amounts appropriated (estimated tax collections) and, from May 1951, deposits by States under voluntary coverage agreements. For 1947-51 includes amounts appropriated to meet costs of benefits payable to certain veterans' survivors. Beginning 1952, includes deductions to adjust for reimbursement to the General Treasury of the estimated amount of taxes subject to refund for employees who paid contributions on more than \$3,600 a year (through working for more than 1 employer)—\$66 million in October 1955 for 1954 taxes.

² Includes interest transferred from the railroad retirement account under the financial interchange provision of the Railroad Retirement Act, as amended in 1951.

³ Represents net expenditures for administration. Beginning November

1951, adjusted for reimbursements to trust fund of small amounts for sales of supplies and services. Beginning October 1953, includes amounts for expenses of plans and preparations for construction authorized by P.L. 170, 83d Cong., 1st sess.

⁴ Includes accrued interest and repayments on account of accrued interest on bonds at time of purchase.

⁵ Preliminary.

⁶ Revised to correspond with *Final Statement of Receipts and Expenditures of the U. S. Government*.

⁷ Includes \$50,781 profit to the fund on sale of securities.

Source: *Monthly Statement of Receipts and Expenditures of the U. S. Government* and unpublished Treasury report.

Table 4.—Old-age and survivors insurance: Monthly benefits in current-payment status at the end of the month by type of benefit and by month, October 1955-October 1956, and monthly benefits awarded, October 1956¹

[Amounts in thousands; data corrected to Nov. 30, 1956]

Item	Total		Old-age		Wife's or husband's		Child's		Widow's or widower's		Mother's		Parent's	
	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount	Number	Amount
Monthly benefits in current-payment status at end of month:														
1955														
October	7,855,522	\$403,960.0	4,406,750	\$271,652.1	1,176,724	\$38,801.8	1,257,568	\$45,537.5	700,631	\$33,550.9	288,455	\$13,167.5	25,394	\$1,250.1
November	7,901,917	407,861.9	4,441,542	274,499.2	1,184,794	39,126.0	1,266,991	45,985.1	693,498	33,729.7	290,039	13,272.3	25,053	1,249.5
December	7,960,616	411,612.8	4,473,971	276,941.8	1,191,963	39,415.5	1,276,240	46,443.6	701,360	34,152.2	291,916	13,403.0	25,166	1,256.5
1956														
January	8,003,915	414,669.5	4,497,924	278,944.5	1,197,385	39,668.0	1,281,915	46,782.0	709,569	34,585.9	291,850	13,425.5	25,272	1,263.6
February	8,069,862	419,429.8	4,541,282	282,556.5	1,207,832	40,119.4	1,287,480	47,096.4	715,965	34,932.3	292,003	13,459.1	25,300	1,266.1
March	8,149,733	424,975.4	4,504,991	286,817.7	1,219,883	40,605.2	1,293,384	47,422.3	723,119	35,317.0	292,990	13,542.4	25,306	1,270.8
April	8,235,504	430,675.4	4,649,159	290,968.1	1,233,164	41,141.2	1,301,983	47,859.3	731,146	35,750.0	294,950	13,677.7	25,492	1,279.1
May	8,315,314	435,742.9	4,697,531	294,528.6	1,246,118	41,632.8	1,310,331	48,312.0	739,968	36,224.6	295,771	13,759.0	25,595	1,285.8
June	8,374,453	439,423.8	4,731,942	296,976.4	1,255,018	41,968.4	1,316,728	48,662.0	747,766	36,647.7	297,294	13,875.9	25,705	1,293.3
July	8,451,169	444,620.4	4,781,036	300,776.8	1,268,051	42,477.0	1,320,390	48,912.8	756,213	37,106.2	299,675	14,047.2	25,804	1,300.4
August	8,566,410	452,345.9	4,855,552	306,613.1	1,290,596	43,336.9	1,327,584	49,300.1	764,555	37,561.7	302,999	14,225.8	25,924	1,308.3
September	8,647,776	457,493.9	4,907,729	310,408.4	1,307,228	43,939.9	1,333,003	49,637.4	772,132	37,976.6	301,685	14,217.8	25,199	1,313.8
October	8,701,498	460,942.4	4,941,397	312,833.8	1,315,464	44,250.7	1,337,359	49,930.3	780,034	38,407.0	301,188	14,202.0	26,056	1,318.6
Monthly benefits awarded in October 1956	115,423	6,425.1	61,360	4,173.3	20,716	701.7	16,643	657.3	11,237	588.3	5,240	291.2	227	13.3

¹ Beginning December 1955, all benefits of persons receiving both an old-age benefit and a widow's, widower's, or parent's secondary benefit are included

only in the number of old-age benefits and the amount of the reduced secondary benefit is combined with the amount of the old-age benefit.

Table 5.—Employment security: Selected data on nonfarm placements and unemployment insurance claims and benefits, by State, October 1956¹

Region and State	Nonfarm place- ments	Initial claims ²		Weeks of unemploy- ment covered by continued claims		Compensated unemployment				Average weekly insured unem- ployment under State programs ⁴	
		Total	Women ³	Total	Women	All types of unemployment ⁴		Total unemployment			
						Weeks com- pensated	Benefits paid ⁵	Average weekly number of beneficiaries	Weeks com- pensated	Average weekly payment	
Total.....	598,633	834,495	315,286	4,114,074	1,706,684	3,460,563	\$91,475,787	752,296	3,128,688	\$27.57	* 878,406
Region I:											
Connecticut.....	9,442	12,484	7,406	57,867	32,048	50,551	1,367,608	10,989	46,357	28.27	12,680
Maine.....	2,162	5,010	2,503	22,864	14,934	17,547	322,856	3,815	13,750	19.79	4,833
Massachusetts.....	19,194	38,421	21,502	150,640	78,151	123,012	3,154,332	26,742	99,155	27.91	33,954
New Hampshire.....	1,665	4,153	2,542	24,179	15,885	20,363	420,037	4,427	16,401	22.80	5,068
Rhode Island.....	1,624	8,980	5,230	37,318	20,495	34,075	880,513	7,408	30,056	27.26	8,221
Vermont.....	1,237	1,126	675	6,003	4,158	4,756	103,206	1,034	4,261	22.88	1,265
Region II:											
New Jersey.....	12,506	39,533	18,356	234,298	117,009	222,471	6,808,304	48,363	195,886	31.70	50,798
New York.....	81,370	130,688	59,635	468,763	210,005	408,631	11,617,289	88,833	352,118	30.55	101,996
Puerto Rico.....	4,585	273	42	2,584	549	1,388	33,067	302	1,378	23.90	-----
Virgin Islands.....	205	-----	0	2	0	34	1	2	17.00	-----	-----
Region III:											
Delaware.....	600	1,852	762	10,552	2,859	11,341	339,579	2,465	10,473	31.17	2,213
District of Columbia.....	3,854	2,906	976	16,429	6,952	14,102	366,116	3,066	13,745	26.14	3,654
Maryland.....	7,180	8,316	2,702	35,707	13,720	34,496	853,114	7,499	30,188	25.89	8,112
North Carolina.....	15,891	19,884	10,528	89,540	49,059	83,444	1,585,224	18,140	77,480	18.99	20,485
Pennsylvania.....	26,386	80,450	32,188	491,732	210,583	453,452	11,913,233	98,577	409,790	27.50	106,728
Virginia.....	7,606	6,008	2,158	28,165	11,874	23,389	493,955	5,085	21,938	21.72	6,022
West Virginia.....	2,795	6,195	1,096	36,475	10,528	27,445	570,818	5,966	24,914	21.49	7,818
Region IV:											
Alabama.....	10,034	10,605	2,689	59,399	17,775	42,313	819,262	9,198	40,740	19.55	12,795
Florida.....	21,598	12,241	5,214	85,975	46,935	68,665	1,390,342	14,927	64,590	20.61	18,141
Georgia.....	11,448	13,619	5,667	84,174	41,481	67,518	1,424,367	14,678	61,923	21.73	18,095
Mississippi.....	8,545	7,476	2,253	36,918	13,817	27,274	527,670	5,929	25,107	19.99	8,362
South Carolina.....	8,489	10,644	4,214	56,673	30,534	45,156	921,245	9,817	41,309	20.88	12,083
Tennessee.....	10,745	16,722	6,020	130,204	57,407	104,924	2,117,772	22,810	99,047	20.50	28,290
Region V:											
Kentucky.....	4,494	15,102	4,240	119,104	40,940	84,715	1,833,794	18,416	79,112	22.25	26,017
Michigan.....	15,554	47,513	9,096	458,888	96,643	393,818	13,381,610	85,613	378,929	34.57	83,783
Ohio.....	32,669	28,523	10,607	142,419	66,768	117,151	3,375,750	25,468	108,146	29.92	30,678
Region VI:											
Illinois.....	23,935	45,259	17,941	226,291	102,077	169,970	4,495,051	36,950	148,345	28.30	45,761
Indiana.....	11,184	20,980	6,542	108,644	37,669	97,615	2,550,052	21,221	87,450	27.42	23,008
Minnesota.....	12,729	8,283	2,453	40,578	15,917	34,896	830,876	7,586	32,705	24.28	9,016
Wisconsin.....	10,111	11,937	3,904	56,809	20,228	45,190	1,333,675	9,824	40,257	30.16	12,175
Region VII:											
Iowa.....	8,244	5,181	1,429	21,097	9,860	17,428	414,012	3,789	15,686	24.85	4,727
Kansas.....	9,577	6,094	1,597	26,510	8,092	22,383	590,047	4,866	20,493	27.31	5,704
Missouri.....	8,695	26,761	10,729	110,927	52,653	82,808	1,598,063	18,002	67,136	21.47	23,453
Nebraska.....	5,355	2,713	951	11,107	5,663	10,024	237,661	2,179	9,552	24.28	2,706
North Dakota.....	2,662	480	161	2,125	600	829	20,169	180	706	25.09	393
South Dakota.....	2,004	733	224	1,019	1,486	31,840	323	1,355	22.00	468	-----
Region VIII:											
Arkansas.....	7,345	7,812	2,626	31,454	10,652	19,874	382,393	4,320	18,057	19.85	7,585
Louisiana.....	10,347	8,309	1,614	34,842	9,734	28,446	604,002	6,184	25,441	22.24	7,480
Oklahoma.....	12,768	7,720	2,035	35,874	13,596	23,649	556,875	5,141	21,585	24.37	8,066
Texas.....	51,172	17,220	5,223	83,768	33,431	79,905	1,747,482	17,371	77,225	22.16	19,395
Region IX:											
Colorado.....	7,850	3,279	995	9,936	4,200	7,227	175,828	1,571	6,844	25.62	2,202
Montana.....	3,345	1,199	439	3,231	1,683	2,832	64,706	616	2,832	22.63	872
New Mexico.....	4,152	1,820	254	5,687	1,102	4,962	120,697	1,079	4,535	25.13	1,535
Utah.....	4,059	2,330	641	8,110	3,353	6,255	166,819	1,360	5,709	27.61	1,793
Wyoming.....	2,375	418	157	1,630	892	1,339	34,092	291	1,212	25.97	394
Region X:											
Arizona.....	6,044	3,703	959	14,244	5,355	9,724	243,999	2,114	9,019	25.68	3,066
California.....	48,730	74,694	25,036	240,016	102,290	193,125	5,354,030	41,984	175,089	28.96	53,153
Hawaii.....	787	2,282	1,101	10,525	4,907	9,098	211,973	1,978	8,163	24.63	(?)
Nevada.....	2,274	2,208	531	9,164	2,425	8,853	287,985	1,925	8,363	33.02	2,100
Region XI:											
Alaska.....	792	1,763	264	4,691	1,166	4,239	127,860	922	4,113	30.29	(?)
Idaho.....	4,018	2,245	495	6,673	3,300	4,549	108,222	989	4,307	24.10	1,550
Oregon.....	6,926	17,967	3,486	40,126	14,106	28,398	783,338	6,173	26,608	28.06	10,139
Washington.....	9,185	22,381	5,198	81,882	29,605	63,460	1,782,943	13,796	59,066	28.90	19,465

¹ Includes, except as otherwise noted, data for the Federal employees' unemployment insurance program, administered by the States as agents of the Federal Government.

⁵ Not adjusted for voided benefit checks and transfers under interstate combined-wage plan.

⁶ Excludes Alaska and Hawaii.

⁷ Data not available.

Source: Department of Labor, Bureau of Employment Security, and affiliated State agencies.

Table 6.—Public assistance in the United States, by month, October 1955—October 1956¹

[Except for general assistance, includes vendor payments for medical care and cases receiving only such payments]

Year and month	Total ²	Old-age assistance	Aid to dependent children		Aid to the blind	Aid to the permanently and totally disabled	General assistance (cases)	Total	Old-age assistance	Aid to dependent children (families)	Aid to the blind	Aid to the permanently and totally disabled	General assistance (cases)											
			Families	Recipients																				
			Total ³	Children																				
Number of recipients																								
1955																								
October	2,552,991	506,459	2,171,160	1,642,869	104,444	242,320	286,000	-	(*)	-1.0	+0.2	+0.6	-1.3											
November	2,554,709	508,113	2,173,222	1,644,728	104,718	242,122	297,000	-	+0.1	-1	+3	-1	+3.8											
December	2,552,899	602,787	2,193,215	1,661,206	104,860	244,010	314,000	-	-1	+8	+1	+8	+5.9											
1956																								
January	2,545,576	605,674	2,205,913	1,670,728	104,947	245,210	330,000	-	-3	+5	+1	+5	+5.1											
February	2,538,518	608,628	2,220,653	1,682,363	104,772	247,117	336,000	-	-3	+5	-2	+8	+1.7											
March	2,535,419	613,246	2,240,856	1,698,206	105,083	249,118	336,000	-	-1	+8	+3	+8	(*)											
April	2,530,720	615,985	2,253,738	1,708,484	105,229	251,533	322,000	-	-2	+4	+1	+1.0	-4.2											
May	2,527,753	617,058	2,258,858	1,713,503	105,469	255,954	303,000	-	-1	+2	+2	+1.8	-5.9											
June	2,523,716	613,720	2,250,229	1,707,629	105,796	258,279	290,000	-	-2	-5	+3	+9	-4.3											
July	2,519,469	607,468	2,228,590	1,691,346	105,990	260,082	288,000	-	-2	-1.0	+2	+7	-8											
August	2,514,669	606,972	2,231,230	1,692,992	106,445	262,105	297,000	-	-2	-1	+4	+8	+3.2											
September	2,511,947	606,563	2,234,793	1,696,484	106,609	263,471	281,000	-	-1	-1	+2	+5	-5.5											
October	2,512,780	606,295	2,236,351	1,699,678	106,822	265,357	282,000	-	(*)	(*)	+2	+7	+4											
Amount of assistance																								
1955																								
October	\$228,821,000	\$136,634,539	\$52,512,850	\$6,039,250	\$13,450,637	\$15,178,000	+0.8	+1.5	-0.6	+1.6	+1.2	-1.2												
November	230,400,000	136,805,741	52,580,182	6,054,577	13,458,492	15,849,000	+7	+6	+1	+3	+1	+4.4												
December	234,139,000	137,666,789	53,415,407	6,060,775	13,709,025	17,300,000	+1.6	+6	+1.6	+6	+1.9	+9.2												
1956																								
January	235,480,000	138,276,533	53,474,008	6,100,906	13,784,271	18,012,000	+6	+4	+1	+2	.5	+4.1												
February	235,733,000	137,284,906	54,051,818	6,110,375	13,943,747	18,506,000	+1	-7	+1.1	+2	+1.2	+2.7												
March	237,157,000	137,313,059	54,818,422	6,144,744	14,082,191	18,585,000	+6	(*)	+4	+6	+1.0	+4												
April	236,526,000	137,412,301	55,239,202	6,170,895	14,272,922	17,407,000	-3	+1	+8	+4	+1.4	-6.3												
May	235,923,000	137,436,276	55,222,938	6,375,783	14,557,834	16,054,000	-3	(*)	(*)	+3.3	+2.0	-7.8												
June	233,756,000	137,005,608	54,785,725	6,392,529	14,649,950	15,051,000	-9	-3	-8	+3	+6	-6.2												
July	234,738,000	138,849,155	54,385,013	6,408,216	14,656,710	15,035,000	+3	+1.2	-7	+2	(*)	-1												
August	236,815,000	139,029,605	54,666,759	6,500,720	14,901,223	16,025,000	+1.0	+3	+5	+1.4	+1.7	+6.6												
September	235,590,000	138,796,047	54,854,426	6,516,200	14,977,834	14,736,000	-5	-2	+3	+2	+5	-8.0												
October	243,634,000	144,389,339	56,394,775	6,715,690	15,362,840	15,296,000	+3.4	+4.0	+2.8	+3.1	+2.6	+3.8												

¹ For definition of terms see the *Bulletin*, January 1953, p. 16. All data subject to revision.

² Total exceeds sum of columns because of inclusion of vendor payments for medical care from general assistance funds and from special medical funds; data for such expenditures partly estimated for some States.

³ Includes as recipients the children and 1 parent or other adult relative in families in which the requirements of at least 1 such adult were considered in determining the amount of assistance.

^a Increase of less than 0.05 percent.

^d Decrease of less than 0.05 percent.

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grams but lowered the percent of need met in all programs except old-age assistance. In that program the percentage was raised. Average payments decreased \$4.23 and \$8.53 per recipient in the programs of aid to the blind and aid to the permanently and totally disabled, respectively, and \$13.32 per family receiving aid to dependent children; the average payment to aged recipients rose \$6.25.

● Insured unemployment among

workers covered by the State programs of unemployment insurance and the program of unemployment compensation for Federal employees showed a decline during October that was somewhat more than seasonal, dropping 11 percent to a weekly average of 878,400. The improvement was centered in the automobile industry, as the production of new models got under way. During the month, 834,500 initial claims (representing new unemployment) were filed. This number was about 10 percent higher than that in September,

but a large part of the increase was the result of the longer workmonth.

Benefits were paid to 752,300 unemployed workers in an average week in October—15 percent fewer than in September but 12 percent more than a year earlier. Payments amounted to \$91.5 million. This total was also less (by \$3.4 million) than that in September, but it was 30 percent greater than the amount paid in October 1955. The average check paid for total unemployment dropped 20 cents, to \$27.57, from the average paid in September.

Table 7.—Amount of vendor payments for medical care for recipients of public assistance, by program and State, October 1956¹

State	Old-age assistance	Aid to dependent children	Aid to the blind	Aid to the permanently and totally disabled	General assistance ²
Total.....	\$12,336,069	\$2,168,548	\$357,870	\$2,238,103	\$5,475,000
Alabama.....	926	947	88	562	
Alaska.....					21,769
California.....	263,984		22,222	(*)	97,399
Connecticut.....	292,968	121,808	6,600	(*)	
District of Columbia.....	125	54	5	531	39
Florida.....	215,701	108,460	7,725	19,390	(*)
Hawaii.....	7,870	21,448	200	5,152	(*)
Illinois.....	1,840,033	277,348	57,603	298,810	478,346
Indiana.....	465,092	82,416	20,479	(*)	193,393
Iowa.....				(*)	211,212
Kansas.....	238,850	47,182	4,250	40,172	32,758
Louisiana.....	906	6,069	233	2,648	2,648
Maine.....	46,980	13,050	1,542	4,542	35,800
Massachusetts.....	2,127,512	128,871	5,845	507,889	122,287
Michigan.....	192,543		3,093	32,407	128,835
Minnesota.....	1,400,310	116,775	38,027	12,637	166,886
Montana.....					173,652
Nebraska.....					177,343
Nevada.....	7,047				71,400
New Hampshire.....	86,685	12,460	2,794	8,970	(*)
New Jersey.....		19,400	24		137,938
New Mexico.....	49,145	34,780	2,056	9,460	5,385
New York.....	2,252,554	658,423	86,575	864,123	(*)
North Carolina.....	33,089	14,737		13,614	194,099
North Dakota.....	148,568	18,735	406	23,174	17,545
Ohio.....	567,960	13,878	21,217		890,063
Oregon.....	217,642	21,074	1,128	45,383	60,506
Pennsylvania.....	216,542	146,753	51,617	70,289	73,920
Rhode Island.....	64,477	34,550	1,170	19,277	38,602
South Carolina.....					15,897
South Dakota.....					
Utah.....	1,445	1,249	25	448	97,806
Virgin Islands.....	369	122	15	52	574
Virginia.....					184
Washington.....	990,261	127,224	9,252	107,608	170,537
West Virginia.....	40,108	32,680	2,104	15,324	6,968
Wisconsin.....	566,377	107,995	13,575	48,471	100,251
Wyoming.....					33,104

¹ For the special types of public assistance figures in italics represent payments made without Federal participation. States not shown made no vendor payments during the month or did not report such payments.

² In all States except California, Florida, Illinois, Kansas, Louisiana, Massachusetts, Michigan, Minnesota, Nevada, New Jersey, Oregon, Pennsylvania, Utah, the Virgin Islands, Washington, West Virginia, and Wisconsin include

payments made on behalf of recipients of the special types of public assistance.

³ Includes an estimated amount for States making vendor payments for medical care from general assistance funds and from special medical funds and reporting these data semiannually but not on a monthly basis.

⁴ No program for aid to the permanently and totally disabled.

⁵ Data not available.

(Continued from page 24)
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Table 8.—Average payments including vendor payments for medical care, average amount of money payments, and average amount of vendor payments for assistance cases, by program and State, October 1956¹

State	Old-age assistance			Aid to dependent children (per family)			Aid to the blind			Aid to the permanently and totally disabled		
	All assistance ²	Money payments to recipients ³	Vendor payments for medical care ²	All assistance ²	Money payments to recipients ³	Vendor payments for medical care ²	All assistance ²	Money payments to recipients ³	Vendor payments for medical care ²	All assistance ²	Money payments to recipients ³	Vendor payments for medical care ²
Total, 53 States ⁴	\$57.46	\$52.88	\$4.91	\$93.02	\$89.56	\$3.58	\$62.87	\$59.76	\$3.35	\$57.89	\$30.05	\$8.43
Alabama	39.12	39.11	.01	28.14	28.09	.05	29.71	29.66	.05	26.31	26.27	.05
California	75.33	74.64	.99	18.00	142.62	119.62	23.00	102.71	82.71	20.00	124.09	84.09
Connecticut	90.53	72.53	18.00	105.56	105.54	.03	60.38	60.37	.02	61.87	61.63	.24
District of Columbia	52.34	52.29	.04	141.74	130.66	11.11	69.07	53.27	16.66	78.88	49.80	3.96
Florida	50.37	47.25	3.12	62.63	57.63	5.00	54.45	51.45	3.00	55.32	50.32	5.00
Hawaii	43.64	38.71	4.93	95.93	88.28	7.65	53.82	51.74	2.08	53.76	49.80	3.96
Illinois	62.15	43.38	20.60	141.74	130.66	11.11	64.22	53.49	11.26	(*)	(*)	(*)
Indiana	51.51	38.61	13.74	93.04	83.78	9.38	76.58	70.17	6.75	74.59	65.05	10.08
Kansas	70.27	63.46	7.23	120.58	111.41	10.15	74.53	74.42	.11	46.95	46.77	.19
Louisiana	63.35	63.34	.01	76.26	75.95	.31	74.53	74.42	.11	46.95	46.77	.19
Maine	52.19	48.24	4.00	88.60	85.62	3.00	56.54	53.54	3.00	61.00	55.07	6.00
Massachusetts	83.64	59.13	25.00	136.40	126.29	10.36	104.75	102.93	2.04	103.79	62.13	44.96
Michigan	60.69	59.62	2.74	127.54	113.39	14.52	67.83	69.04	1.74	81.03	79.47	12.23
Minnesota	72.30	45.25	27.76	127.54	113.39	14.52	84.36	52.95	32.17	57.17	49.75	8.98
Nevada	64.18	62.66	2.73	63.46	62.69	.77				(*)	(*)	(*)
New Hampshire	65.04	50.09	15.00	135.88	122.52	13.50	68.67	57.67	11.00	89.53	59.53	30.00
New Jersey				122.02	119.10	2.91	72.86	73.14	.03			
New Mexico	52.48	47.16	5.32	93.64	87.89	5.74	55.77	50.48	5.29	54.65	49.19	5.45
New York	85.97	65.95	23.71	145.88	135.38	12.16	92.90	76.10	20.09	89.23	70.43	21.81
North Carolina	32.85	32.21	.64							38.87	37.87	1.00
North Dakota	71.70	54.17	18.64	122.28	112.52	11.49	59.39	56.48	3.38	80.01	57.71	23.72
Ohio	63.35	57.50	5.85	93.32	92.53	.79	62.07	56.50	5.57			
Oregon	60.66	58.36	11.86	133.63	127.25	6.38	73.36	69.93	5.43	83.64	70.45	13.63
Pennsylvania	50.48	46.34	4.14	113.07	107.98	5.09	62.85	59.85	2.99	59.39	53.90	5.50
Rhode Island	65.41	58.76	8.23	115.89	105.89	10.00	72.27	66.59	7.36	77.80	68.59	11.77
Utah	60.91	60.76	.16	113.26	112.80	.45	66.30	66.19	.11	66.18	65.93	.26
Virgin Islands	18.49	18.08	.55	34.78	34.28	.50	(*)	(*)	(*)	19.54	19.04	.50
Washington	81.02	63.68	17.64	123.68	109.28	14.54	92.53	80.75	11.77	96.08	76.33	20.26
West Virginia	31.89	30.13	1.75	85.14	83.31	1.83	36.08	34.29	1.79	35.26	33.44	1.82
Wisconsin	67.09	53.43	15.85	147.77	134.20	15.75	72.85	60.64	12.32	105.73	66.44	39.50

¹ Averages for general assistance not computed because of difference among States in policy or practice regarding use of general assistance funds to pay medical bills for recipients of the special types of public assistance. Figures in italics represent payments made without Federal participation. States not shown made no vendor payments during the month or did not report such payments.

² Averages based on cases receiving money payments, vendor payments for medical care, or both.

³ Averages based on number of cases receiving payments. See tables 9-12 for average money payments for States not making vendor payments.

⁴ For aid to the permanently and totally disabled represents data for the 46 States with programs in operation.

^b No program for aid to the permanently and totally disabled.

^d Average payment not computed on base of less than 50 recipients.

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Table 9.—Old-age assistance: Recipients and payments to recipients, by State, October 1956¹

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from—			
		Total amount	Average	September 1956 in—		October 1955 in—	
				Number	Amount	Number	Amount
Total ²	2,512,780	\$144,389,339	\$57.46	(8)	+4.0	-1.6	+6.1
Ala.	101,987	3,989,736	39.12	+0.5	+19.6	+11.4	+34.5
Alaska	1,631	* 95,224	58.38	-5	-6	-1.9	-11.3
Ariz.	14,113	786,103	55.70	(8)	(8)	+8	+5
Ark.	55,152	1,980,344	35.91	+2	+8.2	+3	+8.3
Calif.	265,996	20,038,611	75.33	(8)	+6.2	-8	+6.5
Colo. ³	52,609	5,027,502	95.56	(8)	+4.3	-2	+2.8
Conn.	16,276	1,473,520	90.53	-1	-8	-3.4	+1.2
Del.	1,604	77,994	48.62	+3.5	+10.8	+6	+14.1
D. C.	3,003	157,163	52.34	-2	-6	-2.7	-4.9
Fla.	69,135	3,482,502	50.37	+1	+7.0	-2	+8.0
Ga.	98,133	4,174,348	42.54	(8)	+10.7	-4	+11.5
Hawaii	1,595	69,612	43.64	-1.4	-8	-10.7	-21.0
Idaho	8,334	504,756	60.57	+4	+9.4	-2.8	+6.4
Ill.	89,336	5,552,145	62.15	-3	+5	-4.7	-1.8
Ind.	33,854	1,743,709	51.51	-4	-6	-6.0	-1.5
Iowa	39,424	2,667,838	67.67	+1	+5.9	-3.0	+13.4
Kans.	33,024	2,320,761	70.27	-2	+4.6	-2.4	+4.8
Ky.	57,640	2,229,378	38.68	+1.0	+0.5	+4.2	+13.4
La.	122,642	7,769,416	63.35	+4	+4.6	+1.8	+26.0
Maine	11,745	612,988	52.19	+1	+4.0	-5.9	-6
Md.	10,070	487,328	48.39	+1	+4	-3.5	+2.2
Mass.	85,099	7,117,954	83.64	(8)	-9	-3.5	+4.1
Mich.	70,319	4,267,506	60.69	-3	+8	-4.4	+3.2
Minn.	50,448	3,647,304	72.30	-1	+2.4	-2.1	+3.8
Miss.	71,824	2,074,349	28.88	+3	+3	+2.3	+6.2
Mo.	128,079	7,011,535	54.74	-1	+9.8	-3.1	+6.9
Mont.	8,520	502,541	58.98	-3	+1.0	-4.9	-3.3
Nebr.	17,264	* 913,334	52.90	-4	-3	-2.3	-9
Nev.	2,580	165,578	64.18	-5	+3.3	-1.8	+9.6
N. H.	5,760	375,938	65.04	-6	-4	-6.9	-4.9
N. J.	19,567	1,465,652	74.90	-1	-1	-2.7	+6.1
N. Mex.	9,240	484,915	52.48	+7	+2.7	-12.2	+42.3
N. Y.	95,021	8,160,100	85.97	(8)	+1.1	-4.9	+2.0
N. C.	51,701	1,698,603	32.85	+2	+1.7	-1	+3.4
N. Dak.	7,971	571,533	71.70	+1	+2.7	-1.8	+3.6
Ohio	97,115	* 6,152,082	63.35	-3	-3	-3.1	+6.0
Oklahoma	94,749	6,108,847	64.47	(8)	+2	-3	+3.9
Oreg.	18,350	1,278,345	69.66	+2	+2.7	-4.2	+2.6
Pa.	52,343	2,642,251	50.48	(8)	+7.9	-5.5	+3.3
P. R. ⁷	43,200	344,600					
R. I.	7,830	512,198	65.41	+3	+1.0	-3.0	+4.7
S. C.	37,873	1,391,290	36.74	-7	+9.0	-12.3	-8
S. Dak.	10,256	477,412	46.55	-1	+2.9	-3.3	+2
Tenn.	60,209	2,070,222	34.38	-3	(8)	-6.5	-7.3
Tex.	223,354	10,017,593	44.85	+1	+7.2	(8)	+7.7
Utah	9,224	561,878	60.91	-1	-2	-1.9	-1
Vt.	6,641	330,578	49.78	-1	+1	-2.4	-1
V. L.	676	12,499	18.49	0	+1	-1.5	-2.7
Va.	16,478	520,998	31.62	+1	+1.0	-4.4	-5
Wash.	56,134	4,548,011	81.02	+1	(8)	-3.4	+1.9
W. Va.	22,872	729,342	31.89	-5	+5.5	-3.6	+11.0
Wis.	40,881	2,742,675	67.09	-1	+7	-4.2	-1
Wyo.	3,879	241,698	62.31	+3	+6.7	-2.1	+3.4

¹ For definition of terms see the *Bulletin*, January 1953, p. 16. All data subject to revision.

² Includes 4,279 recipients aged 60-64 in Colorado and payments of \$446,007 to these recipients. Such payments are made without Federal participation.

³ Increase of less than 0.05 percent.

⁴ In addition, supplemental payments of \$13,641 from general assistance funds were made to 62 recipients in Alaska and \$124,427 to some recipients in Nebraska.

⁵ Decrease of less than 0.05 percent.

⁶ Excludes vendor payments of \$73,882 made in October for medical services provided before the pooled fund plan began in July.

⁷ Estimated.

Table 10.—Aid to the blind: Recipients and payments to recipients, by State, October 1956¹

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from—			
		Total amount	Average	September 1956 in—		October 1955 in—	
				Number	Amount	Number	Amount
Total ²	106,822	\$6,715,690	\$62.87	+0.2	+3.1	+2.3	+11.2
Ala.	1,696	50,393	29.71	-8	-13.2	+3.2	-5.8
Alaska	77	5,451	70.79	(8)	(8)	(8)	(8)
Ariz.	789	51,196	64.89	+1	(8)	+6.2	+7.2
Ark.	2,057	86,196	41.90	+4	+6.1	+1.7	+6.9
Calif. ³	13,312	1,226,334	92.12	+4	+5.0	+4.1	+8.6
Colo.	328	21,688	66.12	+6	+4	+3.1	+5
Conn.	330	33,894	102.71	-1.5	+1.5	-1.8	+9.7
Del.	219	15,016	68.57	-5	+6.8	+5	+9.7
D. C.	263	15,881	60.38	+8	+2.7	+4.6	+4.6
Fla.	2,575	140,216	54.45	-3	+9.8	-8.5	+1.2
Ga.	3,470	165,771	47.77	+2	+9.8	+2.0	+13.1
Hawaii	96	5,167	53.82	(8)	(8)	-12.7	-20.2
Idaho	184	12,485	67.85	-2.1	+5.5	-1.1	+9.4
Ill.	3,457	238,782	69.07	+1	+4	-1.3	+1.6
Ind.	1,819	116,810	64.22	+2	+9	+1.2	+8.5
Iowa	1,493	121,922	81.66	+1	+5.9	+4.0	+14.9
Kans.	630	48,248	76.58	-3	+4.0	+2.3	+10.8
Ky.	3,169	126,210	39.83	+4	+8.0	+5.0	+12.9
La.	2,136	159,200	74.53	+1.6	(8)	+3.9	+54.6
Maine	514	29,064	56.54	-1.0	+4.0	-3.7	+1.5
Md.	469	25,598	54.58	-8	+2	-1.9	+2.8
Mass.	1,889	197,867	104.75	-3	+1.8	+3.6	+13.9
Mich.	1,779	120,673	67.83	+1	+2	+5	+7.3
Minn.	1,182	99,717	84.36	-1.0	-8	-5.1	-2.8
Miss.	4,015	156,139	38.89	+1.2	+1.2	+8.3	+21.5
Mo. ⁴	4,910	294,600	60.00	+1.0	+1.0	+13.8	+13.8
Mont.	417	27,713	66.46	-2	+1	-6.3	-4.5
Nebr.	868	6,56,988	65.65	+1.3	+2.0	+12.0	+15.0
Nev.	115	8,937	77.71	-9	+3.3	-9	+2.2
N. H.	254	17,443	68.67	-1.6	-1	-4.5	-3.6
N. J.	940	68,486	72.86	+2.4	+6.3	+5.4	+9.0
N. Mex.	389	21,694	55.77	-8	+9	-4.4	+52.2
N. Y.	4,309	400,320	92.90	-3	+1.9	-4	+3.1
N. C.	4,907	219,433	44.72	-5	+6.8	+7	+10.4
N. Dak.	120	7,127	59.39	0	-9.7	+6.2	-8.1
Ohio	3,808	236,355	62.07	-1	+4	+1.4	+10.3
Oklahoma	1,952	153,318	78.54	+3	+6	-2.9	+2.9
Oreg.	329	24,134	73.36	+3	-2.7	-1.8	-2.5
Pa. ⁵	17,260	1,084,708	62.85	+4	+2.8	+4.0	+28.0
P. R. ⁷	1,700	13,600					
R. I.	159	11,491	72.27	-1.2	-1.3	-6.5	-6.5
S. C.	1,787	74,360	41.61	+1	+9.0	+1.0	+10.9
S. Dak.	196	9,207	46.97	-5	+2.2	-1.5	+5.7
Tenn.	3,092	124,140	40.15	-5	-5	-4.7	-6.5
Tex.	6,564	321,002	48.90	+2	+6.9	+5	+9.2
Utah	225	14,917	66.30	-1.7	-6	-2.6	-5.3
Vt.	136	6,926	50.93	0	+4.6	-12.8	-11.6
V. I.	29	577	(8)	(8)	(8)	(8)	(8)
Va.	1,283	48,739	37.99	-9	-1.3	-1.5	+1.5
Wash. ⁶	786	72,725	92.53	+5	-3	+3.7	+2.9
W. Va.	1,174	42,359	36.08	-2	+5.7	+5	+13.6
Wis.	1,102	80,281	72.85	-2	-8	-1.5	+3.5
Wyo.	63	4,194	66.57	(8)	(8)	(8)	(8)

¹ For definition of terms see the *Bulletin*, January 1953, p. 16. All data subject to revision.

² Data include recipients of payments made without Federal participation and payments to these recipients as follows: California, \$34,982 to 363 recipients; Missouri, \$36,323 to 588 recipients; Pennsylvania, \$614,553 to 9,778 recipients; and Washington, \$120 to 2 recipients.

³ Average payment not computed on base of less than 50 recipients; percentage change, on less than 100 recipients.

⁴ Increase of less than 0.05 percent.

⁵ Decrease of less than 0.05 percent.

⁶ In addition, supplemental payments of \$9,042 were made to recipients from general assistance funds.

⁷ Estimated.

Table 11.—Aid to dependent children: Recipients and payments to recipients, by State, October 1956¹
 [Includes vendor payments for medical care and cases receiving only such payments]

State	Number of families	Number of recipients		Payments to recipients			Percentage change from—			
		Total ²	Children	Total amount	Average per—		September 1956 in—		October 1955 in—	
					Family	Recipient	Number of families	Amount	Number of families	Amount
Total.....	606,295	2,236,351	1,699,678	\$56,394,775	\$93.02	\$25.22	(*)	+2.8	+1.3	+7.4
Alabama.....	19,913	77,290	59,542	500,262	28.14	7.25	+0.1	-32.1	+5.9	-26.5
Alaska.....	1,342	4,667	3,446	115,978	86.42	24.85	+4	-1	+6.2	+1.0
Arizona.....	4,854	18,731	14,344	475,236	97.91	25.37	-1.0	-5.4	+5.5	+13.4
Arkansas.....	7,247	27,196	21,145	402,650	55.56	14.81	-3.4	-4.0	+1.2	+2.5
California.....	49,759	175,021	135,493	6,613,523	132.91	37.79	+2	+6.2	-4.9	-1.5
Colorado.....	6,766	22,116	17,097	644,179	111.72	29.13	+1	+6	+1.1	+4.2
Connecticut.....	5,296	17,143	12,796	755,312	142.62	44.06	-6	-1.8	-6	+3.0
Delaware.....	1,178	4,567	3,497	104,164	88.42	22.81	+3.8	+9.2	+10.5	+13.7
District of Columbia.....	2,143	9,163	7,151	226,219	105.56	24.60	+1.6	+1.1	+7.0	+3.6
Florida.....	21,692	77,487	59,408	1,358,548	62.63	17.53	+3	+13.3	+1.8	+16.0
Georgia.....	13,943	50,925	38,940	1,144,373	82.08	22.47	+6	+10.2	-1.0	+8.1
Hawaii.....	2,802	10,694	8,562	268,809	95.93	25.14	-9	-4.7	-13.4	-11.1
Idaho.....	1,684	6,115	4,502	228,442	135.65	37.36	-1.2	+4.1	-2.4	+2.0
Illinois.....	24,975	98,883	75,215	3,539,912	141.74	35.80	(*)	+2	+15.1	+21.9
Indiana.....	8,783	31,152	23,185	817,183	93.04	26.23	-2	+1.2	+2.1	+5.9
Iowa.....	6,874	24,854	18,538	814,324	118.46	32.76	+1	+4.8	+6.1	+14.5
Kansas.....	4,648	16,925	13,074	560,450	120.58	33.11	+0	+7.3	+4.4	+12.2
Kentucky.....	18,562	67,440	50,731	1,326,197	71.45	19.66	-5	+11.1	-4	+11.9
Louisiana.....	19,780	77,984	59,706	1,508,432	76.26	19.34	+1.0	+6.1	+7.3	+25.1
Maine.....	4,350	15,080	10,906	385,401	88.60	25.56	+1.1	+5.9	+2	+4.8
Maryland.....	6,302	25,806	20,062	616,254	97.79	23.88	+9	+1.3	+2.9	+4.7
Massachusetts.....	12,441	42,008	30,950	1,696,930	136.40	40.40	+1	+5	-3.0	+4.7
Michigan.....	19,267	67,778	49,747	2,311,815	119.99	34.11	+7	+2.9	+3	+5.5
Minnesota.....	8,042	27,251	20,989	1,025,716	127.54	37.64	+5	+3.3	+2.1	+7.3
Mississippi.....	11,764	43,679	34,103	327,223	27.82	7.49	+1	+3	+6.2	+6.6
Missouri.....	19,095	68,663	51,391	1,477,768	77.39	21.52	-4.7	+2.8	-5.2	+8.5
Montana.....	2,041	7,328	5,638	222,219	108.88	30.32	+1.8	+2.6	+9	+4.1
Nebraska.....	2,724	10,003	7,514	268,957	98.74	26.89	(*)	-1	+7.5	+8.5
Nevada.....	523	1,833	1,403	48,682	93.08	26.56	+4.0	+7.2	+10.9	+119.3
New Hampshire.....	923	3,466	2,617	125,419	135.88	36.19	-1.0	-2	-8.1	-5.2
New Jersey.....	6,678	22,232	16,789	814,822	122.02	36.65	+9	+1.9	+9.7	+13.3
New Mexico.....	6,056	22,507	17,162	567,054	93.64	25.19	-4	+1.3	+1.0	+38.4
New York.....	54,146	202,495	150,510	7,899,073	145.88	39.01	(*)	+2.0	+1.0	+5.4
North Carolina.....	19,139	73,684	56,476	1,214,523	63.46	16.48	+1.9	+3.5	+2.0	+3.6
North Dakota.....	1,630	5,978	4,589	199,322	122.28	33.34	0	+1	+11.1	+14.0
Ohio.....	17,577	67,271	51,165	\$1,640,342	93.32	24.38	+7	+4.8	+10.1	+13.0
Oklahoma.....	15,683	52,912	40,302	1,317,383	84.00	24.90	(*)	+6	+1.3	+0.5
Oregon.....	3,303	11,989	9,066	441,377	133.63	36.82	+2	-7	-1.3	+8.3
Pennsylvania.....	28,810	110,981	84,280	3,257,624	113.07	29.35	-1	+3.5	+1.0	+8.5
Puerto Rico ⁶	42,000	150,200	115,400	448,900						
Rhode Island.....	3,455	12,132	9,008	400,383	115.89	33.00	-7	+1.1	+1	+4.1
South Carolina.....	7,931	30,046	23,915	441,366	55.65	14.40	+4	+17.9	-2.2	+14.7
South Dakota.....	2,756	9,239	7,066	231,566	84.02	25.06	-9	-1.1	+1.9	+4.8
Tennessee.....	19,163	69,320	51,858	1,202,367	62.74	17.35	-1.5	-1.2	-4.7	-7
Texas.....	21,451	87,348	66,172	1,508,979	70.35	17.28	+5	+9.2	(*)	+23.0
Utah.....	2,748	9,631	7,149	311,227	113.26	32.32	-2.7	-3.1	-3.4	-3.3
Vermont.....	1,028	3,519	2,635	89,440	87.00	25.42	-1.7	+8.6	-5.7	+2.5
Virgin Islands.....	244	912	755	8,486	34.78	9.30	-2.8	-1.0	+15.6	+15.6
Virginia.....	8,726	34,264	26,629	596,155	68.32	17.40	-3	+6	+5	+4.4
Washington.....	8,752	30,498	22,579	1,082,427	123.68	35.49	+2	+7	+3.0	+6.9
West Virginia.....	17,862	67,522	52,348	1,520,828	85.14	22.52	+3	+6.4	-3	+15.9
Wisconsin.....	7,856	27,714	20,524	1,160,916	147.77	41.89	-2	+1.1	-1.5	+1.6
Wyoming.....	588	2,109	1,609	69,638	118.43	33.02	+3.5	+9.8	+4.3	+12.7

¹ For definition of terms see the *Bulletin*, January 1953, p. 16. All data subject to revision.

² Includes as recipients the children and 1 parent or other adult relative in families in which the requirements of at least 1 such adult were considered in determining the amount of assistance.

³ Decrease of less than 0.05 percent.

⁴ Increase of less than 0.05 percent.

⁵ In addition, supplemental payments of \$165,580 were made from general assistance funds to 4,691 families.

⁶ Estimated.

Table 12.—Aid to the permanently and totally disabled: Recipients and payments to recipients, by State, October 1956¹

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from—			
		Total amount	Average	September 1956 in—		October 1955 in—	
				Number	Amount	Number	Amount
Total	265,357	\$15,362,840	\$57.89	+0.7	+2.6	+9.5	+14.2
Ala.	12,105	318,538	26.31	+.4	-24.2	+10.8	-12.4
Ark.	6,160	196,282	31.86	+2.2	+2.3	+21.5	+23.8
Colo.	5,117	301,041	58.83	+.3	+3	+3.3	+5.6
Conn.	2,178	270,261	124.09	+1.0	+6.1	+5.0	+13.2
Del.	358	21,695	60.60	-10.1	-3.7	+27.0	+42.1
D. C.	2,397	148,314	61.87	+.2	+6	+8.8	+10.4
Fla.	3,878	214,514	55.32	+7.4	+23.4	(*)	(*)
Ga.	12,487	583,133	46.70	+.5	+10.6	+15.2	+28.1
Hawaii	1,301	69,946	53.76	-1.4	-5	-1.6	-16.1
Idaho	910	60,706	66.71	+1.1	+9.3	+6.7	+16.2
Ill.	9,803	773,296	78.88	+1.4	+1.7	+58.6	+56.8
Kans.	3,985	297,253	74.59	+1.1	+5.8	+14.4	+21.7
Ky.	179	5,605	31.31	(*)	(*)		
La.	14,144	664,116	46.95	+.2	+2.0	+6.8	+17.0
Maine	757	46,176	61.00	+2.2	+7.3	+145.8	+156.5
Md.	5,070	287,950	56.79	+.5	+1.8	+4.0	+8.9
Mass.	11,296	1,172,392	103.79	+.8	-4	+7.2	+10.0
Mich.	2,650	214,719	81.03	+.5	+1.8	+13.1	+26.0
Minn.	1,408	80,501	57.17	+2.3	+2.0	+57.3	+56.9
Miss.	3,867	95,206	24.62	+1.1	+1.2	+19.5	+19.7
Mo.	13,619	778,118	57.13	+.5	+10.0	+3.2	+13.3
Mont.	1,465	97,593	66.62	+.1	+1.8	+4.1	+7.7
Nebr.	1,136	* 64,043	56.38	+1.8	+2.5	+379.3	+391.4
N. H.	299	26,769	89.53	+.3	+1.3	+16.8	+35.7
N. J.	4,279	374,126	87.43	+2.0	+3.0	+19.7	+30.7
N. Mex.	1,735	94,811	54.65	+1.8	+5.0	+5	+65.8
N. Y.	39,621	3,535,384	89.23	-4	+1.6	-1.8	+3.2
N. C.	13,614	529,212	38.87	+.7	+2.4	+15.3	+19.2
N. Dak.	977	78,173	80.01	+.9	-1.5	+9.9	+21.1
Ohio	8,704	* 465,515	53.48	+1.1	+7.1	-4	+6.4
Okla.	6,865	403,726	58.81	+1.9	+1.9	+11.2	+11.8
Oreg.	3,329	278,443	83.64	+1.2	+.9	+5.2	+17.3
Pa.	12,782	759,176	59.39	+.2	+6.9	-2.5	+6.7
P. R. ⁵	20,600	178,800					
R. I.	1,638	127,438	77.80	+1.1	+1.7	+7.8	+10.5
S. C.	7,765	271,029	34.90	+.2	+9.8	-4.5	+5.1
S. Dak.	812	38,968	47.99	+.2	+3.6	+11.2	+15.0
Tenn.	2,953	115,410	39.06	+7.0	+6.9	+78.2	+76.0
Utah	1,780	117,802	66.18	+.2	(*)	-4	+1.1
Vt.	566	28,412	50.20	+2.0	+1.6	+16.0	+15.7
V. I.	104	2,032	19.54	+1.0	+.7	+1.0	+2.4
Va.	5,197	206,426	39.72	+1.1	+2.8	+11.7	+12.5
Wash.	5,312	510,403	96.08	+.1	-3	-9	+4.5
W. Va.	8,415	296,714	35.26	(*)	+6.3	-2.3	+10.4
Wis.	1,227	129,729	105.73	+.3	+3.1	+7.2	+17.7
Wyo.	513	32,944	64.22	+2.2	+9.4	+12.7	+19.3

¹ For definition of terms see the *Bulletin*, January 1953, p. 16. All data subject to revision.

² Not computed; August 1955 first month of operation.

³ Percentage change not computed on base of less than 100 recipients.

⁴ In addition, supplemental payments of \$11,726 from general assistance funds were made to some recipients in Nebraska and \$49,080 to 1,962 recipients in Ohio.

⁵ Estimated.

⁶ Decrease of less than 0.05 percent.

Table 13.—General assistance: Cases and payments to cases, by State, October 1956¹

[Excludes vendor payments for medical care and cases receiving only such payments]

State	Number of cases	Payments to cases		Percentage change from—			
		Total amount	Average	September 1956 in—		October 1955 in—	
				Number	Amount	Number	Amount
Total ²	282,000	\$15,296,000	\$54.31	+0.4	+3.8	-1.6	+0.8
Ala.	122	1,502	12.31	-26.9	-61.2	-19.7	-59.1
Alaska	144	8,206	56.99	-5.3	+3.6	-13.8	-11.3
Ariz.	1,940	85,183	43.91	-.9	-7	+13.3	+12.4
Ark. ³	354	4,858	13.72	+34.6	+36.5	+16.8	+13.5
Calif.	27,420	1,428,057	52.08	+2.1	+3.2	-1.7	-5
Colo.	1,462	60,325	41.26	+4.5	+16.1	+12.0	+14.2
Conn.	4,276	* 148,576	53.73	+3.7	-3.9	+2.1	+2.5
Del.	928	51,578	55.58	+5.3	+3.8	-8.0	+5.0
D. C.	592	36,370	61.44	+.9	+1.1	+16.1	+13.9
Fla. ⁴	5,300	94,000					
Ga.	2,205	48,311	21.91	+6.2	+4.7	+2.0	-3.6
Hawaii	1,494	78,371	52.46	-2.4	-2.2	-28.1	-32.8
Idaho ⁵	58	3,014	51.97	(?)	(?)	(?)	(?)
Ill.	27,877	2,023,016	72.57	+.8	+6.6	-17.2	-14.7
Ind. ⁶	11,822	401,003	33.92	+.3	+6.6	+8.3	+7.8
Iowa	3,536	120,244	34.01	+2.5	+8.9	+3.5	+10.7
Kans.	1,790	97,694	54.55	+4.2	+3.4	-1.6	-6
Ky.	2,688	79,025	29.40	+18.5	+17.2	-3.1	-2.4
La.	8,458	361,991	42.80	+.5	+2.3	+11.8	+21.3
Maine	2,818	121,618	43.16	-4.6	-7.9	-8.3	-10.0
Md.	1,918	103,956	54.20	+5.6	+5.7	+26.4	+29.0
Mass.	9,747	572,144	58.70	-1.0	+4.4	-14.4	-5.2
Mich.	18,855	1,478,337	78.41	-1.6	+11.6	+24.0	+47.9
Minn.	5,398	312,160	57.83	-1.5	+3.3	-5.9	-2
Miss.	900	12,876	14.31	-.6	-1.6	-8.7	-1.4
Mo.	6,627	321,647	48.54	+1.2	+1.6	+10.7	+23.7
Mont.	529	19,713	37.26	-23.1	-18.2	-13.0	+1.5
Nebr.	1,197	48,680	40.67	-1.5	+7.0	-6.4	-6.3
Nev. ⁷	330	10,900					
N. H.	803	39,453	49.13	-.4	+2.1	-9.7	-2.3
N. J. ⁸	6,432	514,872	80.05	+1.0	+1.6	-6.9	-5.9
N. Mex.	350	10,278	29.37	+4.8	+4.7	-8.9	+2.6
N. Y. ⁹	23,425	1,828,073	78.04	+.2	+9	-8.0	-9.3
N. C.	2,616	62,265	23.80	+4.6	+4.9	+23.7	+38.3
N. Dak.	311	17,696	56.90	+11.5	+46.8	-2.5	+36.0
Ohio ¹⁰	25,848	1,337,554	51.75	-5.8	-1.8	-4.4	-3.0
Oklahoma	8,062	132,132	16.39	+4.8	+8.9	+8.1	+4.0
Oreg.	3,800	21,111					
Pa.	21,861	1,427,395	65.29	-1.2	+2.3	-4.2	-5.9
P. R. ¹¹	900	16,500					
R. I.	2,974	212,446	71.43	-1.0	+3.3	-3.8	-5.1
S. C.	1,735	40,972	23.61	+5.1	+5.8	-6.0	-2.0
S. Dak.	1,008	38,825	38.27	-2.7	+7.6	-8.5	-5.7
Tenn.	1,870	32,997	17.65	-.9	+8	-25.0	-17.2
Tex. ¹²	9,300	208,000					
Utah	1,412	88,662	62.79	-1.2	+4.6	+9.5	+14.6
Vt. ¹³	1,000	41,000					
V. I.	121	2,302	19.02	0	-.6	+16.3	+13.5
Va.	1,688	58,811	34.84	-5.6	-4.2	-21.4	-22.2
Wash.	9,590	622,952	64.96	+4.9	+5.7	+9.4	+13.9
W. Va.	2,706	87,816	32.45	+2.3	+7.8	+20.5	+34.5
Wis.	6,312	459,886	72.86	-2.1	-4	-2.0	-2.1
Wyo.	232	11,735	50.58	+5.5	+5.6	+20.2	+35.3

¹ For definition of terms see the *Bulletin*, January 1953, p. 16. All data subject to revision.

² Partly estimated; does not represent sum of State figures because total excludes for Indiana and New Jersey an estimated number of cases receiving medical care, hospitalization, and burial only and payments for these services.

³ State program only; excludes program administered by local officials.

⁴ About 12 percent of this total is estimated.

⁵ Excludes assistance in kind and cases receiving assistance in kind only and, for a few counties, cash payments and cases receiving cash payments.

⁶ Percentage change not computed on base of less than 100 cases.

⁷ Includes unknown number of cases receiving medical care, hospitalization, and burial only, and total payments for these services.

⁸ Estimated.

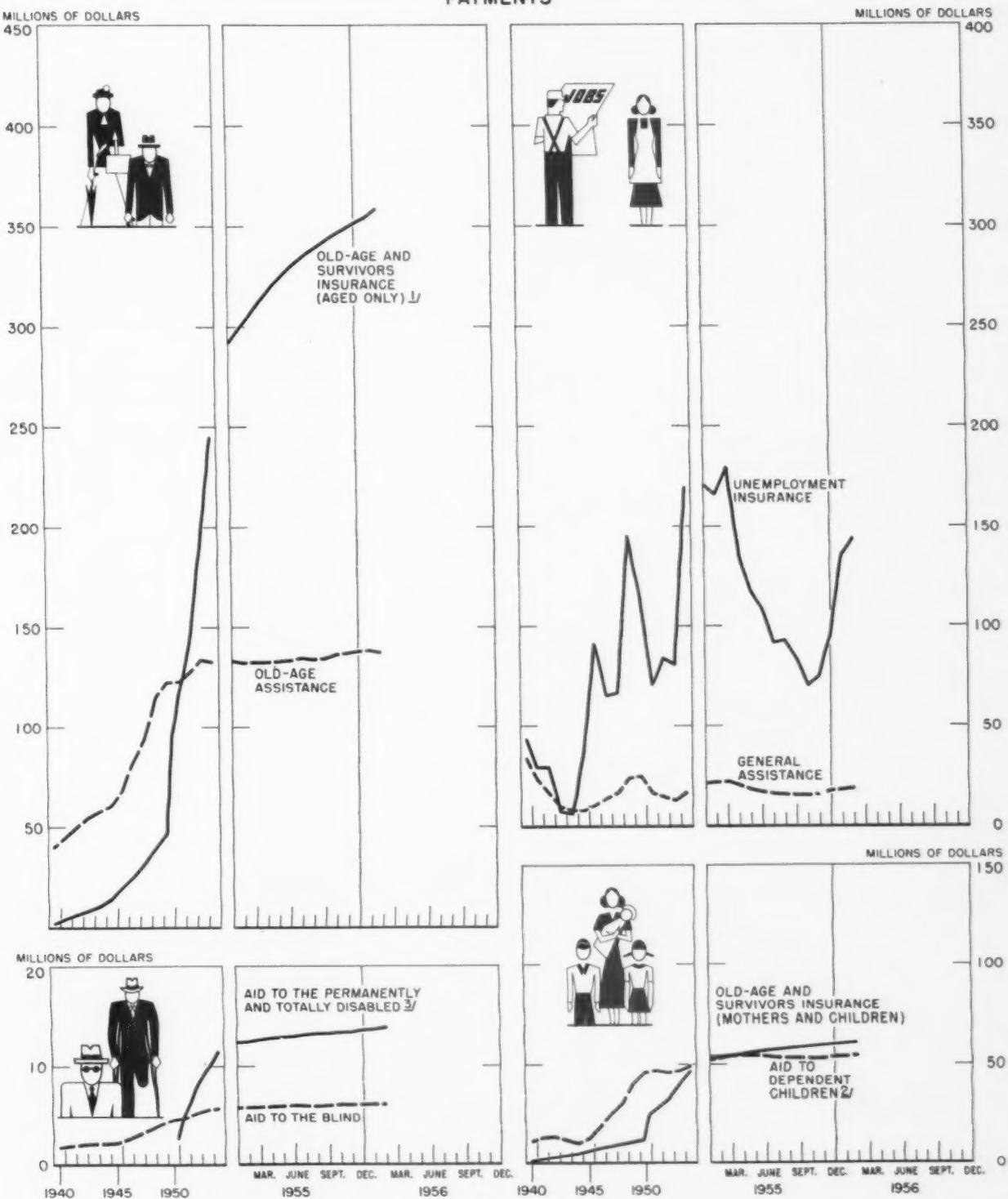
⁹ Includes cases receiving medical care only.

¹⁰ Includes cases and payments of \$225,864 representing supplementation of other assistance programs.

¹¹ Estimated on basis of reports from sample of local jurisdictions.

Social Security Operations*

PAYMENTS



* Old-age and survivors insurance: benefits paid during month (current-payment status); annual data represent average monthly total. Public assistance: payments during month under all State programs; annual data represent average monthly total. Unemployment insurance: gross benefits paid during month under all State laws; annual data represent average monthly total.

¹ Receiving old-age, wife's or husband's, widow's or widower's,

or parent's benefit. Beginning September 1950, includes a small proportion of wife beneficiaries under age 65 with child beneficiaries in their care.

² Children plus 1 adult per family when adults are included in assistance group; before October 1950, partly estimated.

³ Program initiated October 1950.

NOTE: Data for payments and data for individuals receiving payments appear in alternate months.

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